



**County of Lincoln — Parts of Kesteven**

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# **ANNUAL REPORT**

of the

**COUNTY MEDICAL OFFICER**

**OF HEALTH**

for the Year

**1966**





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COUNTY OF LINCOLN - PARTS OF KESTEVEN

H E A L T H   C O M M I T T E E

(Constitution as at 31st December, 1966)

CHAIRMAN:

Councillor S. P. KING, O.B.E.

VICE-CHAIRMAN:

Alderman Mrs. D. SCHWIND, M.B.E.

Aldermen:

Capt. H. W. N. FANE, D.L.  
Chairman of the County  
Council (ex-officio)  
A. E. BELLAMY  
C. H. FENELEY  
H. L. HUDSON

H. P. KELWAY, F.C.A.  
Chairman of Finance Committee  
(ex-officio)  
J. H. LEWIS, M.A.  
Vice-Chairman of the County  
Council (ex-officio)  
W. E. YOUNG (resigned 1.8.66)

Councillors:

H. W. BAILEY  
Mrs. C. A. BAKER  
Mrs. M. BANGAY  
Mrs. G. M. BOYFIELD  
Mrs. E. DAVIES  
E. J. GRIEVES  
J. R. GRUMMITT  
H. KNOWLES  
Mrs. M. LARGE, M.A., B.Comm.  
C. E. MARSHALL

Mrs. E. M. MAWER  
Mrs. F. McCALLUM (appointed 6.7.66)  
Mrs. E.C. PACKER, B.E.M.  
Rev. S. RADFORD (resigned 28.6.66)  
Mrs. N. ROBSON  
H. SCARBOROUGH  
E. A. SKINNS  
Mrs. H. SMITH  
J. E. SNELL  
J. H. W. TAYLOR  
G. E. WALTHAM  
C. YATES (appointed 6.8.66 - died 15.9.66)  
R. W. YATES (appointed 26.11.66)

Co-opted Members:

Mrs. T. H. N. BATTLE  
Mrs. J.C. B. HARRISON (resigned 14.10.66)  
Mrs. A. E. MILLETT  
Mrs. I. PICK

Representing Kesteven Local Medical and Panel Committee:

T. K. BRANDRETH, M.B., B.S.

Representing Kesteven Local Dental Committee:

F. H. WALLACE, L.D.S., R.C.S., (ENG).



PUBLIC HEALTH OFFICERS OF THE COUNTY COUNCIL

County Medical Officer of Health:

T. J. O'SULLIVAN, M.A., M.D., D.P.H. (Retired 15.10.66)  
E. W. G. BIRCH, D.F.M., M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.  
(Appointed 15.11.66)

Official Address: Public Health Department, County Offices, Sleaford.  
Telephone - Sleaford 241.

Deputy County Medical Officer of Health:

ELIZABETH A. WHITELEY, M.B., Ch.B.

Assistant County Medical Officers and District Medical Officers of Health

C. W. SHEARER, M.B., Ch.B., D.P.H.  
H. ELLIS SMITH, M.B., B.Ch., B.A.O., D.P.H.  
MARGARET A. LORAIN, M.B., Ch.B., D.P.H., D.C.H., B.Sc. (resigned 30.6.66)  
1 vacancy

Assistant County Medical Officer

PATRICIA A. MORRIS, M.B., Ch. B.

Consultant Chest Physicians:

H. G. H. BUTCHER, B.A., L.R.C.P., M.R.C.S., D.P.H.  
G. B. ROYCE, B.S., M.B., Ch.B.  
(joint appointments with R.H.B.s)

Consultant Staff:

The part-time services of the following consultants have been made available during the year to this Authority by arrangements with the East Anglian and Sheffield Regional Hospital Boards:

Orthopaedic Surgeons:

J. P. JACKSON, F.R.C.S., M.R.C.S., L.R.C.P.  
NOEL J. SMITH, B.A., M.B., B.Ch., B.A.O., F.R.C.S.I.

Ophthalmic Surgeons:

G. M. BARLING, M.B., Ch.B., D.O.M.S.  
A. H. BRIGGS, M.Sc., M.B., Ch.B., D.O.M.S.  
S. P. REDMOND, M.B., B.Ch., B.A.O., D.O.M.S.  
B. A. CHAUDHARY, M.B., B.S., D.T.M. & H., D.O.

Ear, Nose and Throat Surgeons:

DOREEN A. BIRCH, M.B., Ch.B., F.R.C.S.  
A. A. FINLAYSON, M.B., Ch.B., F.R.C.S.  
M. SPENCER HARRISON, M.D., F.R.C.S., F.R.C.P.

Dermatologists:

D. I. McCALLUM, M.B., Ch.B., M.R.C.P., D.P.H.  
E. C. RITTER, M.B., Ch.B., M.R.C.P.

Chief Dental Officer:

J. E. MANN, L.D.S., R.C.S.

Area Dental Officers:

W. GARETH THOMAS, L.D.S., R.C.S.  
B. B. PARSONS, L.D.S.  
U. H. HERNANDEZ, B.D.S., R.C.S. (appointed 27.9.66)

Anaesthetists (part-time):

N. H. BLOOM, M.R.C.S., L.R.C.P., D.A.  
A. CAMPBELL HOLMS, M.B., Ch.B., F.F.A.R.C.S., D.A.

Dental Surgery Assistants:

Miss A. M. TURNER  
Miss C. M. WILLOWS  
Mrs. J. V. LEDBURY  
Mrs. T. BARKER (appointed 2.12.66 - part-time)  
Mrs. K. DARBY (part-time)  
Mrs. W.M. SPRINGFIELD (appointed 15.7.66 - part-time)

Public Analyst (part-time):

E. R. W. FOGDEN, B.Sc., F.R.I.C.

County Nursing Superintendent:

Non-Medical Supervisor of Midwives:

Miss L. DICK, S.R.N., S.C.M., H.V. Cert.

Assistant County Nursing Superintendent:

Miss M. C. EDWARDS, S.R.N., S.C.M., H.V. Cert.

County Health Visitors:

Miss O.A. BROOKS, S.R.N., S.C.M., H.V. Cert.  
Miss B. K. P. BROWN, S.R.N., S.C.M., Q.N., H.V. Cert.  
Miss M.A. DANIELS, S.R.N., S.C.M., S.R.F.N., H.V. Cert.  
Miss J. E. DAWSON, S.R.N., S.C.M., H.V. Cert (appointed 1.8.66)  
Mrs. D. E. EDGELL, S.R.N., S.C.M., H.V. Cert.  
Miss M. A. HETHERINGTON, S.R.N., S.C.M., H.V. Cert.  
Mrs. E. HOLLAND, S.R.N., S.C.M., H.V. Cert. (resigned 21.7.66)  
Mrs. J. L. JONES, S.R.N., S.C.M., H.V. Cert. (part-time)  
Mrs. S. J. SUTTON, S.R.N., S.C.M., H.V. Cert. (resigned 8.1.66)  
Mrs. M. M. TUCKER, S.R.N., H.V. Cert.

Also 20 District Nurse/Midwives act as part-time Health Visitors.

Physiotherapists:

Miss E. A. PECK, S.R.N., M.C.S.P. (retired 22.10.66)  
Mrs. S. G. BROWNLOW, M.C.S.P. (part-time w.e.f. 12.5.66)  
Mrs. L. A. BRENDON, M.C.S.P. (appointed 1.9.66 - part-time)

Speech Therapists:

Mrs. M. E. WATSON, L.C.S.T. (part-time w.e.f. 31.8.66)  
Miss H. A. SMITH, L.C.S.T. (resigned 31.3.66)  
Miss D. M. GLOVER, L.C.S.T. (appointed 1.4.66)

County Health Inspector:

J. F. LOFTHOUSE, M.R.S.H., M.I.P.H.E., M.A.P.H.I.

County Home Help Organiser:

Mrs. D. JONES, M.I.H.H.O.

Matron, St. Catherine's Road Day Nursery, Grantham:

Mrs. M. E. HIND, S.R.F.N.

Non-Medical Staff - Mental Health Services:

Senior Mental Welfare Officer:

N. A. CLARKE, A.I.S.W.

Mental Welfare Officers:

W. HOLMES, A.I.S.W.  
D. WRAY  
R. G. BOYFIELD  
Mrs. M. HARKNESS, S.C.M., S.E.N.



Sandon School (Junior Training Centre) Grantham:

Supervisor:

MRS. E.F.M. SURRIDGE

The Beacon (Hostel for Subnormal Children), Grantham:

Warden:

L. COLLINSON

Matron:

Mrs. I. COLLINSON

Chief Clerk:

W. S. DENCH

Assistant Chief Clerk:

A. COLLEY

County Ambulance Officer:

H. SANDS, F.I.A.O.

DISTRICT MEDICAL OFFICERS OF HEALTH AND PUBLIC HEALTH INSPECTORS

District	Medical Officer of Health (all part-time appointments)	Chief Public Health Inspector
Borough of Grantham	C.W. Shearer, M.B., Ch.B., D.P.H.	C. Taylor, M.A.P.H.I.
Borough of Stamford	H. Ellis Smith, M.B., B.Ch., B.A.O., D.P.H.	L.J. Roll, A.R.S.H., Cert. S.I.B.
Urban District of Sleaford	Margaret A. Loraine, M.B., Ch.B., D.P.H., D.C.H., B.Sc. (resigned 30.6.66)	T.E. Dagwell, M.R.S.H. M.A.P.H.I.
Urban District of Bourne	H. Ellis Smith, M.B., B.Ch., B.A.O., D.P.H.	N. Buckle, A.R.S.H., (resigned 31.7.66) A. Thompson, M.R.S.H., M.S.I.A. (appointed 1.8.66)
Rural District of North Kesteven	Margaret A. Loraine, M.B., Ch.B., D.P.H., D.C.H., B.Sc. (resigned 30.6.66)	J. Freeman, M.I. Mun.E., M.R.S.H., M.A.P.H.I.
Rural District of East Kesteven	Margaret A. Loraine, M.B., Ch.B., D.P.H., D.C.H., B.Sc. (resigned 30.6.66)	J.A. Saville, M.A.P.H.I., M.R.I.P.H.H.
Rural District of South Kesteven	H. Ellis Smith, M.B., B.Ch., B.A.O., D.P.H.	W.A. Chivers, M.R.S.H., M.A.P.H.I.
Rural District of West Kesteven	C.W. Shearer, M.B., Ch.B., D.P.H.	M.F. Johnson, M.A.P.H.I. C.R.S.H.

## F O R E W O R D

To the Chairman, Aldermen and Members of the Kesteven County Council.

Mr. Chairman, My Lord, Ladies and Gentlemen,

I have the honour to present my Annual Report on the health of Kesteven for the year 1966.

It is a record of events and work that was performed largely under the direction of my predecessor, Dr. T.J. O'Sullivan, who retired in October 1966. He was an officer of the County Council for more than twenty-nine years and had occupied the post of County Medical Officer of Health since 1961. He is well known throughout Kesteven for his charm, ability and kindness. A man of many interests he is remembered with gratitude for his efforts in particular on behalf of the children and old people of Kesteven. He has in recent years devoted much effort and achieved great success in fostering co-operation between the three branches of the National Health Service. As his successor, I am grateful for his wise advice and wish him a long and happy retirement.

An examination of the statistics will show that the Kesteven figures compared favourably with the figures for England and Wales. Heart disease continued to be the main cause of death. It is disappointing to record a further increase in the number of illegitimate births.

There were no major changes in the administration of the services provided under the National Health Service Act, 1946. There was, however, an awakening of interest in the provision of health centres in the county and at the end of the year preliminary discussions were taking place between the local health authority and general medical practitioners to examine the possibility of such centres being erected at Bourne, Market Deeping and Grantham.

The number of mothers and children attending at infant welfare centres again increased and great credit is due to the doctors, nurses and voluntary workers who staff the centres.

It is pleasing to record that at the end of the year the establishment for dental officers was full and that work had started on the modernising of the dental suite at the Barn Hill Clinic, Stamford.

There were no major changes in the organisation of the nursing services. In Kesteven there is no scheme for the attachment of nursing staff to general practices, nevertheless, co-operation between the nursing staff and general practitioners is good, and by reason of the rural nature of the county and the fact that many of our nurses undertake combined duties, there is in many areas a virtual attachment of nursing staff.

The recruitment of medical, nursing and medical auxiliary staff has presented problems throughout the year, and at the end of the year vacancies existed in the aforementioned groups.

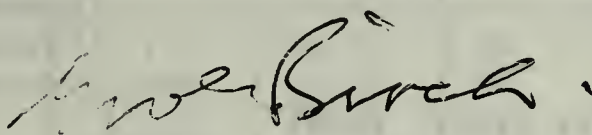
The statistics relating to vaccination and immunisation are much the same as in previous years. I must stress the continued need to maintain high levels of immunisation among the child population, in particular against diphtheria and poliomyelitis.

The Ambulance, Home Help and Mental Health Services have continued to meet the heavy demands placed upon them in a most praiseworthy manner.



There is in Kesteven a tradition of voluntary work and I would like to thank all the volunteers who give invaluable help in the running of many of the local health authority services.

My thanks go out to the staff of the Health Department for their consistently fine work and to the Chairman and Vice-Chairman of the Health Committee and the Chairman of the Ambulance and Public Health Sub-Committee for their support and guidance.

A handwritten signature in dark ink, appearing to read "David Birch". The signature is fluid and cursive, with a horizontal line drawn underneath it.

County Medical Officer of Health

Public Health Department,  
County Offices,  
SLEAFORD,  
Lincs.



## GENERAL STATISTICS

Area of Administrative County (in acres)	462,100
Population:	
Census 1921	108,237
Census 1931	110,360
Census 1951	130,717
Census 1961	134,842
Registrar General's Estimate, 1966	149,580
Number of inhabited houses (Census 1921)	25,456
(Census 1931)	27,590
(Census 1951)	35,080
(Census 1961)	41,770
Number of families or separate occupiers (Census 1921)	25,823
(Census 1931)	27,845
(Census 1951)	35,662
(Census 1961)	41,921
Rateable Value (1st April, 1966)	£4,119,229
Estimated product of a penny rate, 1966/67	£16,678

## EXTRACTS FROM VITAL STATISTICS FOR THE YEAR 1966

NOTE: Birth and Death Rates :

As the age and sex distribution of the population in different areas materially affects both the Birth and Death Rates of these areas, comparability factors allowing for this are issued by the Registrar General for each Local Government Unit. These factors may be used for calculating what are termed in this Report as 'NETT' rates and fairer comparisons are obtained if the latter are used when comparing rates with those of any other area (when these have been similarly adjusted) or with the rates for the Country as a whole.

These factors for Births and Deaths in respect of Kesteven are 1.00 and 0.92 respectively. The corresponding figure when multiplied by the Crude rate (that is, for Births or Deaths as the case may be) will give the Nett Rate.

The figures given in brackets in the following tables are comparative figures for 1965.

## LIVE BIRTHS

	<u>Males</u>	<u>Females</u>	<u>Total</u>	
Legitimate	1,320	1,305	2,625	(2,500)
Illegitimate	72	80	152	(124)
Total	1,392	1,385	2,777	(2,624)

Live Birth Rate per 1,000 population:

Crude	18.56	(17.92)
Nett	18.56	(17.92)
Rate for England and Wales	17.70	(18.01)

Illegitimate Live Births per cent of total live births: 5.47 (4.73)

## STILL BIRTHS

	<u>Males</u>	<u>Females</u>	<u>Total</u>	
Legitimate	13	13	26	(36)
Illegitimate	-	3	3	(1)
Total	13	16	29	(37)

Still Birth Rate per 1,000 Live and Still Births:	10.33	(13.90)
Rate for England and Wales	: 15.40	(15.80)

TOTAL LIVE AND STILL BIRTHS

	<u>Males</u>	<u>Females</u>	<u>Total</u>	
Legitimate	1,333	1,318	2,651	(2,536)
Illegitimate	72	83	155	(125)
Total	1,405	1,401	2,806	(2,661)

The following table gives comparative statistics relating to births in the Administrative County since 1951:-

Year	LIVE BIRTHS				STILLBIRTHS	
	Legit- imate	Illegi- timate	Total	Rate (per 1,000 pop.)	No.	Rate (per 1,000 Total births)
1951	2,073	98	2,171	16.36	42	19.0
1952	1,993	102	2,095	15.56	52	24.2
1953	2,044	101	2,145	16.16	54	24.6
1954	1,990	107	2,097	16.16	51	23.7
1955	1,949	92	2,041	15.70	53	25.3
1956	2,032	96	2,128	16.12	54	24.7
1957	2,054	87	2,141	16.05	50	22.8
1958	2,101	87	2,188	16.39	43	19.3
1959	2,135	85	2,220	16.64	53	23.3
1960	2,257	89	2,346	17.35	40	16.7
1961	2,236	81	2,317	16.81	34	14.4
1962	2,396	101	2,497	17.80	54	21.2
1963	2,518	120	2,638	18.64	40	14.9
1964	2,474	110	2,584	17.95	40	15.2
1965	2,500	124	2,624	17.92	37	13.9
1966	2,625	152	2,777	18.56	29	10.33

The number of births notified in the county under Section 203 of the Public Health Act, 1936, as adjusted by any transferred notifications was 2,762 live births and 29 stillbirths.

Details of births in each of the 8 county districts are given in Table I on page 58.

INFANT DEATHS (Deaths under one year of age)

	<u>Males</u>	<u>Females</u>	<u>Total</u>	
Legitimate	25	24	49	(44)
Illegitimate	2	1	3	(-)
Total	27	25	52	(44)

## Infant Mortality Rates:

Total infant deaths per 1,000 total live births	- 18.72	(16.77)
Legitimate infant deaths per 1,000 legitimate live births	- 18.67	(17.60)
Illegitimate infant deaths per 1,000 illegitimate live births	- 19.74	(NIL)
Infant Mortality Rate for England and Wales	- 19.00	(19.00)

NEONATAL DEATHS (Deaths under four weeks of age)

	<u>Males</u>	<u>Females</u>	<u>Total</u>	
	20	19	39	(30)
Neo-natal Mortality Rate per 1,000 total live				
		births -	14.04	(11.43)
Rate for England and Wales			- 12.90	(13.00)



EARLY NEO-NATAL DEATHS (Deaths under one week of age)

<u>Males</u>	<u>Females</u>	<u>Total</u>	
15	16	31	(27)

Early Neo-Natal Mortality Rate per 1,000 total live births - 11.16 (10.29)

Rate for England and Wales - 11.10

PERINATAL MORTALITY (Stillbirths and deaths under one week combined)

<u>Males</u>	<u>Females</u>	<u>Total</u>	
28	32	60	(64)

Perinatal Mortality Rate per 1,000 total live and stillbirths - 21.38 (24.05)

Rate for England and Wales - 26.30 (26.90)

Infant Deaths and Rates in each of the past 10 years:-

Year	Deaths (Infants under 1 year)	Rate per 1,000 total live births	Rate for England & Wales
1957	44	20.55	23.1
1958	45	20.57	22.5
1959	38	17.12	22.2
1960	48	20.46	21.8
1961	44	18.99	21.4
1962	50	20.02	21.7
1963	46	17.44	21.1
1964	55	21.28	19.9
1965	44	16.77	19.0
1966	52	18.72	19.0

MATERNAL DEATHS (including abortion) - 1 (1)

Maternal Mortality Rate per 1,000 live and stillbirths - 0.36 (0.38)

Rate for England and Wales - 0.26 (0.25)

Maternal Deaths and Rates in each of the past 10 years:

Year	Maternal Deaths	Rate per 1,000 live and still births	Rate for England & Wales
1957	0	0.00	0.47
1958	2	0.90	0.47
1959	0	0.00	0.38
1960	0	0.00	0.39
1961	1	0.42	0.33
1962	0	0.00	0.35
1963	0	0.00	0.28
1964	1	0.38	0.25
1965	1	0.38	0.25
1966	1	0.36	0.26

DEATHS FROM ALL CAUSES (including members of the armed forces stationed in the area)

<u>Males</u>	<u>Females</u>	<u>Total</u>	
935	828	1,763	(1,596)

Crude Death Rate per 1,000 estimated population - 11.79 (10.90)

Nett Death Rate per 1,000 estimated population - 10.84 (9.92)

Rate for England and Wales - 11.70 (11.50)



## CHIEF CAUSES OF DEATH

Details of deaths supplied by the Registrar General are classified under the 36 headings based on the Abbreviated List of the International Statistical Classification of Diseases, Injuries and Causes of Death, 1948. The following is a statement of the chief causes of death in Kesteven compiled from the Registrar General's returns for the year:-

Cause of Death	No. of deaths	Rate per 1,000 of estimated population	
1. Coronary Disease, Angina	310	2.07	(1.80)
2. Other Heart Disease	272	1.82	(1.62)
3. Vascular Lesions of Nervous System	210	1.40	(1.71)
4. Other defined and ill-defined diseases	159	1.06	(0.94)
5. Other Malignant and Lymphatic Neoplasms	158	1.06	(0.87)
6. Pneumonia	120	0.87	(0.57)
7. Other Circulatory Disease	101	0.67	(0.68)
8. Bronchitis	74	0.49	(0.50)
9. Malignant Neoplasm, Lung, Bronchus	54	0.36	(0.35)
10. Malignant Neoplasm, Stomach	43	0.29	(0.27)
11. ( Motor Vehicle Accidents	32	0.21	(0.23)
( All other Accidents	32	0.21	(0.16)
12. Hypertension with Heart Disease	29	0.19	(0.10)

Total Deaths and Rates in each of the past 10 years:-

Year	No. of Deaths	Rate per 1,000 estimated population		Rate for England and Wales
		Crude	Nett	
1957	1,571	11.78	10.84	11.5
1958	1,543	11.56	10.29	11.7
1959	1,505	11.28	10.26	11.6
1960	1,559	11.53	10.83	11.5
1961	1,560	11.32	10.64	11.9
1962	1,639	11.68	11.09	11.9
1963	1,672	11.81	11.22	12.2
1964	1,597	11.10	10.55	11.3
1965	1,596	10.90	9.92	11.5
1966	1,763	11.79	10.84	11.7

## DEATHS FROM HEART DISEASE

Reference to the table of Causes of Death shows that heart disease remains the principal cause and that 611 people died in 1966 from the diseases included under this heading. The following table shows deaths from heart disease occurring within the past 10 years:-

Year	Deaths from Heart Disease	Crude Death Rate per 1,000 estimated population	Percentage of total deaths from all causes
1957	579	4.34	36.8
1958	537	4.02	34.8
1959	514	3.85	34.1
1960	565	4.18	36.2
1961	520	3.77	33.3
1962	566	4.03	34.5
1963	549	3.88	32.8
1964	536	3.72	33.6
1965	515	3.52	32.5
1966	611	4.08	34.7



## DEATHS OF PERSONS AGED 65 YEARS AND OVER

Year	Persons	Percentage of total deaths
1961	1,118	71.67
1962	1,199	73.15
1963	1,214	72.61
1964	1,150	72.01
1965	1,124	70.43
1966	1,290	73.17

Further information regarding causes of death, etc., may be found on tables II and III at the end of this Report.

## DEVELOPMENT OF LOCAL AUTHORITY HEALTH SERVICES

Reasonable progress was made in the implementation of our development plan during the year. The government's six months' restriction on major items of capital expenditure introduced during the latter part of 1965 postponed the beginning of work on the training centre and hostel for adult mentally subnormals.

Mention was made in last year's report of the upsurge of interest by general practitioners in the provision of health centres in the county. Preliminary enquiries suggested that there might be a need for such centres at Stamford, Bourne, Grantham, Market Deeping and possibly North Hykeham. In view of this the County Council agreed in principle to the erection of health centres at all of these places instead of new or improved health clinics as originally agreed. This meant the cancellation of the scheme of improvements and extensions to the Beaconfield Clinic, Grantham, for which a tender had been accepted. It also meant the preparation of new plans for the projects at Market Deeping, Stamford and Bourne. At Stamford the doctors concerned had second thoughts and eventually decided against participating in the proposal to build a health centre.

A programme for modernising the dental suites at our Grantham, Stamford and Sleaford clinics, agreed to in late 1964, was put in hand during the year. This work could be carried out independently of the proposed major schemes for these clinics.

With regard to purpose built infant welfare centres, loan consent was received towards the end of the year to the building of the mini-clinic at Metheringham. This clinic will be built on the same site as a branch library. Despite urgent and repeated requests approval for the building of a similar clinic at Cranwell had not been received by the end of the year. Representations were received from other villages about the provision of centres and although approval was given in principle to the erection of a clinic at one of these where there would be room on the site earmarked for a branch library, it is extremely doubtful whether official sanction would be forthcoming for the others (even if the County Council felt justified in putting proposals forward) owing to the comparatively small population to be served.

All the five ambulance stations are modern purpose built buildings and there is room on the sites for any necessary extensions. Provision was made in the development plan for additional bays at Sleaford and Grantham, and for extensions and improvements at Bourne. The work at Bourne and Sleaford was almost completed by the end of the year.



INFANT WELFARE CENTRES

The total number of centres maintained by the County Council during the year remained at 60. Five of the centres are held at County Council clinic premises and fifty-five at rented premises such as village halls, church halls, etc. Most of the centres are run with the help of voluntary committees. Many members of these committees have served for a number of years and on behalf of the County Council I would like to thank all members of the committees and their helpers for the valuable service that they render to the mothers and young children of the county.

During the latter half of the year it was not possible to fill a vacancy on the full-time medical staff and it was necessary to engage a number of doctors on a sessional basis to staff certain centres in the North, East and West Kesteven areas. I am pleased to say that generally these arrangements have worked well and I would like to place on record my appreciation of the help which these doctors have given.

The total number of attendances at the centres showed an increase of 2,534 over the figure for 1965. The number of individual children who attended the centres went up by 374. Further details of the attendances at each centre, during 1966 appear in table IV on page 61.

<u>Total Attendances:</u>	Children born in 1966	17,594
	Children born in 1965	15,764
	Children born in 1961-64	10,709
		<u>44,067</u>

<u>Number of individual children who attended:</u>	Born in 1966	2,266
	Born in 1965	1,739
	Born 1961-64	1,772
		<u>5,777</u>

Number of Consultations with medical staff: 9,041

Comparative figures for the last five years are given below:

Year	Individual Children who attended I.W.C.s	Total Attendances	Consultations with M.O.
1962	4,458	30,719	5,845
1963	4,958	34,335	7,139
1964	5,233	40,199	7,355
1965	5,403	41,533	8,290
1966	5,777	44,067	9,041

In addition there are eight 'unofficial' centres, five in villages and three at Royal Air Force stations. These centres are organised on an informal basis without a doctor in attendance, by district nurses and other interested persons, and 2,468 attendances were recorded during 1966.

CONSULTANT SERVICES

The specialist service arrangements were as outlined in my earlier reports. Brief details of the services available, together with particulars of the pre-school children seen under these arrangements are given below:



## Ophthalmic

Clinic	Errors of Refraction		Other Eye Defects		Glasses Prescribed	
	New Cases	Re-Inspections	New Cases	Re-Inspections	New Cases	Re-Inspections
Grantham	52	49	10	8	21	15
Stamford	3	-	-	-	2	-
Sleaford	26	41	5	5	12	5
Bourne	7	3	-	-	-	1
Lincoln	14	44	-	-	3	10
Totals	102	137	15	13	38	31

All the clinics referred to above, with the exception of that at Lincoln, are held at County Council premises. The clinic at Lincoln to which cases from the north of the county are referred is a special clinic for children and is held at the County Hospital.

One pre-school child was referred to the Consultant Ophthalmic Surgeon at the Stamford and Rutland Hospital and subsequently operative treatment was carried out.

## Orthopaedic

Specialist clinics continued to be held at the Authority's premises at Grantham and Sleaford and 108 pre-school children (including 56 new cases) were seen by the surgeons in attendance who held 184 consultations. Regular treatment sessions for massage, remedial exercises, ultra-violet light, etc., were held at these clinics and also at those at Stamford and Bourne by the Council's physiotherapy staff who dealt with 47 pre-school children; these children made 896 attendances.

## Ear, Nose and Throat

The same arrangements for the examination and ascertainment of pre-school children apply as for children of school age. When such cases come to our notice they are, with the approval of the family doctor, referred to the appropriate specialist and his recommendations are acted upon.

Our health visitors have received special training in connection with the identification of deaf children and carry out the recommended tests on children attending our infant welfare centres. Audiometric tests are also carried out by the speech therapists on children referred by the medical and nursing staff.

Eleven children of pre-school age were seen as new cases by the E.N.T. specialists. Seven of these children had defective hearing, three were suffering from chronic tonsillitis and one from enlarged adenoids.

## Paediatric

With the approval of their respective family doctors, ten children of pre-school age were referred to paediatricians at local hospitals.

## Surgical

One pre-school child was referred to the surgeon at the Grantham General Hospital.

## Dermatology

One pre-school child suffering from a skin condition was seen at the Grantham General Hospital by the consultant dermatologist.



## SPEECH THERAPY

Our well-established speech therapy service suffered a severe disruption when in March we lost the full-time services of Mrs. M. Watson and Miss H. Smith, who, since coming to us in September, 1961 and September, 1963, respectively, have done excellent work with the schoolchildren and those of pre-school age. We were fortunate, however, in securing the services of Miss D.M. Glover who commenced her duties on a whole-time basis on 1st April, 1966, and Mrs. Watson returned to take up part-time duties on the 31st August, 1966.

During the year 25 pre-school children (including 16 new cases) were seen at the various County Council clinics. These children made a total of 581 attendances.

## DENTAL TREATMENT

It is most pleasing to report a further improvement in the staffing situation of the county's dental service. Mr. U.H. Hernandez, B.D.S. (Edin.), was appointed to the staff as Area Dental Officer for North Kesteven and this appointment brought the total of full-time officers to four. Each of the dental officers is expected to carry out inspection and treatment of pre-school children and expectant and nursing mothers when necessary.

Following the posting of a service dental officer to R.A.F. Digby, negotiations were resumed with the Ministry of Defence for the establishment of a dental service for schoolchildren, pre-schoolchildren and expectant and nursing mothers at R.A.F. Digby. These negotiations proved successful and as a result Flt. Lt. M. Gann, the officer concerned, was able to undertake such a service, carrying out inspections and treatment on two evenings a week.

The average school entrant at the age of five years has 5 or 6 teeth already decayed. It is generally accepted that most tooth decay in schoolchildren is caused by the consumption of too much sugar, particularly sticky snacks between meals. Dental health education can help to reduce dental decay in the very young by teaching the mothers the cause of decay and how this can be prevented or at least reduced. The mothercraft classes held at the clinics are ideal for teaching dental health and a talk on dental care is included at some stage of the eight week course. Dental officers occasionally visit the classes and show films especially produced for mothers. These shows are followed by talks and questions on oral hygiene.

Mr. W.G. Thomas, Area Dental Officer, West Kesteven, reports - "There is still a great deal of apathy towards dental matters and I feel that dental health education is the only way to interest the reluctant. Again, I feel that the emphasis should be on the younger age groups, the expectant and nursing mothers and mothers of pre-schoolchildren. In this way a nucleus of dentally conscious individuals will be built up who themselves can act as ambassadors."

There was an appreciable increase in the number of pre-schoolchildren inspected at the clinics. In all 244 of these children were examined (an increase of 115 over the previous year) and 186 were treated. Three hundred and fourteen visits were made for treatment and 230 teeth were extracted mainly under general anaesthesia. Fillings in deciduous (milk) teeth numbered 128.

The number of mothers treated again rose from 33 to 55 but this was not due to any greater demand but rather to an extension of the dental service. Unlike the number of pre-schoolchildren, the number of mothers is not expected to rise appreciably in the future. Expectant and nursing mothers will in the majority of cases have their own dentist and are unlikely to make a change during pregnancy, a change that in any case would only be temporary as the availability of the local authority services to a mother ceases one year after the birth of the child.

Particulars of the cases dealt with during the year appear in Table V on page 65.



## FAMILY PLANNING

The County Council continued to grant the free use of accommodation at the county clinics at Grantham and Stamford to the Family Planning Association, who held clinics twice monthly at each place. The clinics continue to be well attended.

Additional help in the form of small grants is given to the Association by the County Council.

Similar help continued to be given to the Association's branches at Lincoln and Boston in recognition of the service they provide at these clinics to women attending from the northern and eastern areas of the county.

Early in the year the Ministry of Health issued Circular No. 5/66 on Family Planning. The circular drew attention to the advantages of planned parenthood and urged local authorities to review their present arrangements for family planning. They were also directed to make arrangements for advice and treatment to be available free of charge to women to whom pregnancy would be detrimental to health. The importance of publicising places and times of treatment was stressed as also was the desirability of giving full support to voluntary bodies working in the family planning field. Arising out of this circular it was agreed by the County Council that publicity should be given to the clinics serving the county. It was also decided that in the case of women to whom pregnancy would be detrimental to health the clinics should be requested to reduce or waive the consultation fee and that the County Council should bear the cost of supplies.

## HOSPITAL PROVISION FOR MOTHERS AND CHILDREN

Reports on the circumstances of 315 expectant mothers referred for maternity beds on social grounds were submitted to the appropriate hospital authorities.

Arrangements were also made for five children under five years of age to receive hospital in-patient treatment. Of these five children, three were admitted for removal of tonsils and adenoids, one as a surgical case, and one for treatment for a skin condition.

## PREMATURE INFANTS

During the year under review there were 155 live births assignable to this county of infants notified as weighing  $5\frac{1}{2}$  lbs or less at birth; 135 of these survived at least 28 days.

Eighteen of these premature babies were born at home or in a nursing home and of these, two were transferred to hospital on or before the 28th day of life. Nineteen premature babies died during the first seven days of life.

There were sixteen premature stillbirths during the year of which fifteen occurred in hospitals and one at a domiciliary confinement.

Further details relating to premature infants are given on table VI on page 66.

## PHENYLKETONURIA

Routine testing for phenylketonuria is carried out by our health visitors (when this has not already been done in hospital) between the 10th and 14th day of life and between four and six weeks of age. During 1966 2,502 tests were carried out and no positive reactions were reported.



## CONGENITAL ABNORMALITIES

The scheme for the reporting of congenital defects observed at birth seems now to be well established. Our revised birth notification cards which make special provision for the entry of all necessary details relating to congenital defects have been in use for some time and have proved to be very valuable, providing as they do an immediate reminder to the midwife or doctor notifying a birth of the need to give the required information.

Details relating to 38 babies were sent to the Registrar General, an increase of three over the previous year. The total number of defects reported was 49, seven of the babies having more than one defect. The broad classification of the reported defects was as follows:-

Central Nervous System	14
Eye, Ear	1
Alimentary System	6
Heart and Great Vessels	1
Respiratory System	-
Uro-genital System	2
Limbs	20
Other Skeletal	-
Other Systems	3
Other Malformations	2
	<hr/>
Total	49
	<hr/>

## CARE OF UNMARRIED MOTHERS

The number of illegitimate live births assigned to the county in 1966 was 152, representing 5.47 per cent of the total live births recorded. Comparative figures for 1965 were 124 and 4.7 respectively. The illegitimacy rate for England and Wales in 1965 was 7.7 per cent - the rate for 1966 is not available at the time of writing this report. When considering these figures it should be remembered that they refer not only to children born to unmarried girls and women but also to those children born illegitimately to married women living with their husbands, married women separated from their husbands, and widows and divorcees. It is thought that these latter groups may account for up to 20 per cent of the total number of women having illegitimate babies.

The work of assisting unmarried mothers continued as in previous years with many of the girls and young women receiving help and advice from our nursing and health visiting staff and from their family doctors. The County Council's arrangements with the Lincoln Diocesan Board for Social Work, under which the Board's caseworkers undertake domiciliary investigations and where necessary arrange for the mother's admission to a suitable mother and baby home, continued to operate very satisfactorily. One hundred and thirty-two cases relating to unmarried parents and illegitimate children were dealt with in Kesteven by the Board's caseworkers during 1966. Financial help was given by the County Council towards the cost of maintaining thirteen unmarried mothers during their stay at mother and baby homes. In addition to giving this type of financial help the County Council is one of the five local health authorities in Lincolnshire making an annual grant to the Board towards the cost of providing this valuable service.

## PROVISION OF MATERNITY OUTFITS

These outfits which are purchased centrally are supplied through convenient distribution points to all the Council's domiciliary midwives for free distribution as necessary. Virtually all domiciliary cases now take advantage of this facility.



MATERNITY SERVICES

The arrangements for holding weekly mothercraft and relaxation classes in the five main centres of population in the county continued unchanged.

Details of attendances at these classes compared with those for the previous year (given in brackets) are as follows:-

	<u>Mothers</u> <u>Attending</u>	<u>Attendances</u>
Stamford	60 (78)	480 (597)
Grantham	95 (75)	568 (416)
Sleaford	82 (62)	472 (407)
Bourne	39 (29)	264 (167)
North Hykeham	61 (35)	337 (211)
	<u>337 (279)</u>	<u>2,171 (1,798)</u>

ANTE AND POST-NATAL CLINICS

Ante and post-natal clinics are held at the general practitioners' surgeries with the district midwife in attendance. Where it is difficult for expectant mothers to attend surgeries, the district midwife is usually able to help by providing transport. In the more isolated areas the ante-natal examination takes place at home, the doctor being accompanied by the district midwife. Post-natal clinics are also held at doctors' surgeries with the district midwife in attendance.

Expectant mothers in the North Hykeham area who desire a home confinement may book the services of a midwife at the Church Hall, Moor Lane, North Hykeham, on any Monday from 2 to 3 p.m.

DAY NURSERY PROVISION

The County Council's Day Nursery at St. Catherine's Road, Grantham, provides accommodation for 15 children under 2 years of age and 25 children between 2 and 5 years. Priority of admission is granted to children from families which fall within the following categories:-

- (a) where the mother is the sole wage-earner;
- (b) where there is sickness in the family or where there are home conditions likely to prejudice seriously the health of the child;
- (c) where, in exceptional circumstances, it appears that admission is desirable in the interests of the child.

Details of attendances, etc., throughout the year are given in the following table:-

	No. of children on register		Average daily attendance		No. of mothers whose children were on register	
	Under 2 years	Over 2 years	Under 2 years	Over 2 years	In whole-time employment	In part-time employment
January	19	33	13	22	42	5
February	19	33	6	5	42	5
March	21	35	11	18	43	8
April	20	35	14	24	45	6
May	18	36	16	27	41	6
June	18	32	16	25	38	6
July	19	28	14	22	40	5
August	19	26	13	21	38	4
September	20	30	17	25	36	5
October	22	29	15	22	37	6
November	20	32	14	20	39	6
December	21	31	8	15	39	6
Average for Year	20	32	13	21	40	6



I am indebted to Mrs. M.E. Hind, the Matron, for the following report on the working of the nursery during 1966:-

### Children

"The demand for nursery accommodation was again very high. One hundred and forty-four names were entered on the waiting list for vacancies. Thirty-eight children were admitted from the priority groups. Several of these children were admitted upon the request of mental welfare officers who have expressed their appreciation regarding the immediate help given both to long and short stay children needing care, when their mothers are receiving treatment in hospital.

"It was regretted that several children of nurses and teachers had to be refused immediate vacancies as the demand for priority cases was exceedingly high this year.

"The nursery was unfortunately affected by a mild outbreak of dysentery in February and to prevent any serious spread of infection, it was considered wise to close the nursery for ten days. Several children developed measles and chicken-pox in December. All the children were medically examined periodically throughout the year, and no serious defects were found.

### Training

"The day nursery and the two local nursery schools continued to operate as training schools for the National Nursery Examination Board, in affiliation with the Nottingham County Council.

"We were very pleased to learn that the County Council had approved the addition of two extra students, making an annual intake of six students, thus giving the opportunity to more girls to train for this extremely popular and valuable work. It was decided that as the N.N.E.B. syllabus had extended the age range of children to be studied from 0 - 5 years to 0 - 7 years that one of the extra students should attend the Harrowby Infants School for practical experience with 5 - 7 year olds, and the second student should attend the Diagnostic Unit at Wyndham Park Nursery School.

"The final results of the N.N.E.B. certificate awards were a little disappointing this year. Three students sat for the examination; the fourth had previously resigned, due to marriage, and had left the district. Two students were awarded the certificate, one after resitting the examination in November. The third student failed her examination, and decided not to resit it as she had found employment with children elsewhere. This was the first and only failure to date."

### NURSERIES AND CHILD MINDERS REGULATION ACT, 1948

The number of registrations under this Act continued to grow until at the end of the year we had -

(a) 6 private day nurseries; and

(b) 25 daily minders

on our register, compared with 5 and 17 respectively a year previously.

The nurseries were registered to take up to 112 and the daily minders up to 226 children at any one time compared with 92 and 147 at the end of 1965.

## WELFARE FOODS SERVICE

Centres for the distribution of national dried milk, cod liver oil, vitamin tablets and orange juice are located wherever there is a demand. There were 72 distribution points in operation at the end of the year, 60 being at official infant welfare centres, the remaining 12 being at private homes or shops, and R.A.F. stations.

Details of issues of welfare foods during 1966 and the comparative figures for the previous year are as follows:-

	National Dried Milk	Cod Liver Oil	Vitamin Tablets A & D	Orange Juice
1965	18,999	2,301	3,007	30,221
1966	16,510	2,183	2,912	34,202

From this table it will be seen that national dried milk, cod liver oil and vitamin tablets sales have fallen slightly, but that orange juice sales show a marked increase on the previous year.

I should like to mention our appreciation of the valuable service given by the many voluntary helpers throughout the county, who undertake the sale and distribution of both proprietary and national welfare foods at these centres and attend to the day-to-day administrative work involved.

## M A T E R N I T Y   A N D   N U R S I N G   H O M E S

There were no changes during the year in the composition of the register. At the end of the year there were two nursing homes on the register, providing 46 beds - all for general cases.

Regular periodic visits of inspection to these homes continued to be made by the County Nursing Superintendent throughout the year.



## H E A L T H   V I S I T I N G

### Staff

The year began with a staff of 8 whole-time and one part-time qualified health visitors out of an establishment of 14. In addition, there were 23 district nurse/midwives undertaking health visiting as part of their combined duties.

At the 31st December, 1966, we had a staff of 7 whole-time and one part-time qualified health visitors, plus 20 district nurse/midwives undertaking health visiting duties.

Advertisements for staff continue to be made. In the meantime, certain routine duties are being undertaken by temporary staff who will be replaced by qualified health visitors whenever they become available.

During the year, 677 persons aged 65 and over received a total of 4,332 visits, compared with 1,008 persons and 4,600 visits in 1965 and 983 persons and 5,399 visits in 1964.

The following statistics relate to the home visiting undertaken by the health visiting staff during 1966, with comparative figures for 1965 given in brackets. Ineffective visits have been excluded.

	<u>First Visits</u>	<u>Total Visits</u>	
Children born in 1966	2,639 (2,732)	8,724	(7,858)
Children born in 1965	2,063 (2,213)	6,300	(6,388)
Children born in 1961-64	3,199 (3,963)	8,500	(9,550)
* Expectant Mothers	258 (203)	441	(294)
Tuberculous households	160 (177)	307	(362)
Persons aged 65 and over	677 (1,008)	4,332	(4,600)
Other cases (i.e. hospital discharges, infectious diseases etc.)	124 (116)	769	(657)
Total Home Visits		29,373	(29,709)

\* Excluding visits by District Nurse/Midwife/Health Visitors.

In addition to the above, health visitors were in attendance at infant welfare centres and clinics, details of which appear in other sections of this Report.

## M I D W I F E R Y   A N D   H O M E   N U R S I N G

### MIDWIFERY

The number of midwives who gave notice of intention to practise in the Authority's area during the year 1966 was 112, of whom -

50 were domiciliary midwives employed by the County Council;

59 were employed by Hospital Management Committees;

3 were employed privately.

At the end of the year, 45 domiciliary midwives were employed by the County Council.

The following are details of cases attended during the year:-

Midwives	Domiciliary Cases	Cases in Institutions	Total
(1) Employed by County Council	560	-	560
(2) Employed by Hospital Management Committees	-	2,226	2,226
TOTALS	560	2,226	2,786

The total number of confinements attended by midwives in the county, 2,786 was lower than that for 1965 (2,856) and 1964 (2,919). It was also lower than the average for the years 1962-66 (2,838). There was once again an increase in the proportion of hospital confinements, 79.9% compared with 77.8% in 1965, 77.6% in 1964 and 76.0% in 1963. The pattern of domiciliary midwifery in the county however, varied considerably from area to area, with the number of home confinements remaining high in some areas and low in others.

The increasing number of hospital confinements demands a quick turn-over of available maternity beds. This has resulted in a very large increase in the number of cases discharged home before the end of the minimum lying-in period of 10 days. The total number of early discharges during 1966 was 1,209, compared with 891 in 1965, 755 in 1964 and 567 in 1963. These early discharges are cared for in the home by the domiciliary midwives.

The total number of visits paid to all maternity cases during 1966 amounted to 15,115 plus 7,134 ante-natal visits - a total of 22,249, compared with 21,934 (14,734 plus 7,200 ante-natal visits) in 1965 and 23,242 (15,015 plus 8,227 ante-natal visits) in 1964. Miscarriages attended totalled 62 compared with 53 in 1965 and 68 in 1964.

The number of cases in which medical aid was summoned by midwives under Section 14(1) of the Midwives Act, 1951, totalled 76 - all domiciliary.

Other notifications from midwives were received as follows:-

Stillbirths	38
Deaths	7
Liability to be a source of infection	Nil

The number of routine inspections of nurse/midwives carried out by the County Nursing Superintendent and her Assistant amounted to 40. In addition, they made 278 special visits.

#### Analgesia

Of the 45 domiciliary midwives employed by the County Council at the end of the year, 44 were qualified to administer gas/air analgesia.

The extent to which one or other of the various forms of analgesia was administered during 1966 by the midwife or doctor in attendance at the domiciliary confinements was as follows, with comparative figures for 1965 given in brackets:-

<u>Gas/Air</u>	<u>Trilene</u>	<u>Pethedine</u>
205(303)	214(215)	353 (417)



## Refresher Courses for Midwives

During the year, six midwives employed by the County Council attended approved refresher courses in accordance with the rules of the Central Midwives Board.

## Pupil Midwives

During the year two pupils completed Part II midwifery training under the direct supervision of one of the three County Council's midwives approved as tutors by the Central Midwives Board.

The number of pupils referred to us for Part II midwifery training is dependent upon the availability of pupils under our agreement with the Peterborough and Stamford Hospital Management Committee.

## HOME NURSING

During the year 2,952 persons received 56,125 visits, compared with 2,804 persons and 56,351 visits in 1965 and 2,875 persons and 51,667 visits in 1964.

During the year 1,552 persons aged 65 years and over received 39,283 visits, compared with 1,450 persons and 39,929 visits in 1965 and 1,437 persons and 35,101 visits in 1964.

An analysis of the work undertaken by the district nurses during the year 1966 (with comparative figures for the previous year given in brackets) is as follows:-

<u>Type of Case</u>	<u>No. of Cases</u>	<u>No. of Visits</u>
Medical	1,766 (1,665)	37,494 (37,833)
Surgical	1,137 (1,067)	18,002 (17,926)
Infectious diseases	4 (11)	10 (57)
Tuberculosis	13 (11)	373 (205)
Maternal complications	26 (41)	209 (264)
Others	6 (9)	37 (66)
Totals	2,952 (2,804)	56,125 (56,351)

## GENERAL

### Staff

Seven district nurse/midwives left during the year and seven were appointed. One district nurse was also appointed. At the 31st December, 1966, actual staff employed was as follows:-

19 District Nurse/Midwives with combined duties  
26 District Nurse/Midwives (includes 1 part-time)  
6 District Nurses

### Housing

No further houses were built or purchased during the year.

At the 31st December, 1966, the position was that the County Council owned 17 houses, of which 15 had been specially built and two purchased. In addition, the County Council rented two houses for nurses.

### Transport

The County Council agreed to the purchasing of three new cars during the year. At the 31st December, 1966, the total number of cars used by the nursing service was as follows:-

Owned by the County Council	32
Owned by District Nurse/Midwives	27
Total	59

### Disposable Incontinence Pads and Pants

These pads are supplied to bedridden incontinent patients, free of charge, through the district nurse. They have been provided since October, 1963, and have proved to be of inestimable value to the patients and to persons looking after them. As well as overcoming the soiled bed linen problem, they are time saving for the nurses. Disposal of used pads has presented no real problem. They are usually wrapped up and burnt in the domestic boiler or outdoor incinerator.

The County Council also provide waterproof pants or knickers with disposable linings for the use of ambulant incontinent patients.

### Other Disposal Equipment

Disposable syringes and needles, face masks and gloves are provided for all district nurses and midwives. Since the disposable needle, unlike a conventional needle, needs no preparatory cleaning or sterilizing, the time and energy of our nurses and midwives can be conserved for other tasks.

### The Marie Curie Memorial Foundation

The Foundation was established in July, 1948. It is an independent voluntary organisation and is not state aided.

The aims of the Foundation are sufficiently wide to cover all aspects of the problems associated with cancer and the principal objects being pursued at the present time are:-

- (a) To establish residential homes throughout the country for patients with cancer.
- (b) To provide, as promptly as possible, nursing and other assistance for cancer patients being cared for in their own homes.
- (c) To provide general information and an advisory service concerning certain aspects of cancer for the general public.
- (d) To obtain, through the Scientific Committee of the Foundation, a greater understanding of the disease; to assist in its prevention and to embark upon new channels of investigation and research.

A national survey showed that many cancer patients were being nursed at home. In spite of the relief work already being done, patients were frequently unable to have their urgent needs satisfied. The Foundation established its "Area Welfare Grant Scheme" to meet this need, and one of the principal aims is to give help 'in kind' to necessitous cancer patients immediately the need is apparent, without any administrative delay. To achieve this, block grants are made to the Medical Officers of Health of County Councils and County Boroughs for the administration of the service on behalf of the Foundation. Control is vested in one senior officer to whom the district nurses have day-to-day access so that an immediate purchase to meet the specific need of a cancer patient which cannot be met otherwise is possible. Special arrangements for night nursing and attendance are also made by the Foundation.

This is an extremely valuable scheme and action was taken in November, 1966, to make it available to patients in Kesteven when needed. During the few remaining weeks of the year, one case received assistance at home.



# V A C C I N A T I O N   A N D   I M M U N I S A T I O N

The Council's scheme for vaccination against smallpox under Section 26 of the National Health Service Act as set out in the Annual Reports for 1948 and 1955 continued to operate without change. The scheme for diphtheria immunisation continued as outlined in the Annual Report for 1961, when the use of combined antigens was introduced.

Note: The figures in brackets in the tables in this section are comparative figures for 1965.

## SMALLPOX VACCINATION

Details of persons under 16 years of age vaccinated against smallpox for whom records were received during 1966 are shown in the following table:-

Smallpox Vaccination	Age at Date of Vaccination							Total
	0-3 Mths.	3-6 Mths.	6-9 Mths.	9-12 Mths.	1 Yr.	2-4 Yrs.	5-15 Yrs.	
No. Vaccinated	6	37	48	94	710	281	167	1,343 (962)
No. re- vaccinated	-	-	-	-	2	40	215	257 (129)

The figures for primary vaccination show an increase of 381 on the total for 1965. The age group 1 to 2 years, in which it is recommended that infant vaccination should be carried out, accounted for an increase of 161. The acceptance rate for children under 2 years of age at 31.12.66 was estimated to be 34%. The number of re-vaccinations showed an increase of 128 in comparison with the total for 1965.

## DIPHTHERIA, WHOOPING COUGH AND TETANUS IMMUNISATION

The following Table A gives details of all diphtheria, whooping cough and tetanus immunisation given to children during 1966. Tables B, C and D give separate details for diphtheria, whooping cough and tetanus immunisation respectively, the figures shown having been included in Table A.

TABLE A

	Primary Course						Total	Rein- forcing Injec- tions
	Children born in years							
	1966	1965	1964	1963	1959- 1962	Others under age 16		
Diphtheria	-	-	-	-	1	-	1	147
Diphtheria/ Whooping Cough	-	-	-	-	-	-	-	1
Diphtheria/ Tetanus	2	2	-	2	21	37	64	1,343
Diphtheria/ Whooping Cough/ Tetanus	897	1,134	86	28	80	25	2,250	960
Diphtheria/ Whooping Cough/ Tetanus/Polio.	-	-	-	-	-	-	-	-
Whooping Cough	-	-	-	-	-	-	-	-
Tetanus	-	-	-	1	42	210	253	245
TOTAL	899	1,136	86	31	144	272	2,568 (2,665)	2,696 (2,534)

TABLE B

Diphtheria Immunisation	Children born in years						TOTAL
	1966	1965	1964	1963	1959- 1962	Others under age 16	
No. of children who completed a primary course of immunisation	899	1,136	86	30	102	62	2,315 (2,251)
No. of children who received a secondary or re-inforcing injection	-	163	273	81	1,276	658	2,451 (2,274)

TABLE C

Whooping Cough Immunisation	Children born in years						TOTAL
	1966	1965	1964	1963	1959- 1962	Others under age 16	
No. vaccinated with combined vaccine	897	1,134	86	28	80	25	2,250 (2,187)
No. vaccinated with plain vaccine	-	-	-	-	-	-	- (-)
TOTAL	897	1,134	86	28	80	25	2,250 (2,187)

TABLE D

Tetanus Immunisation	Children born in years						TOTAL
	1966	1965	1964	1963	1959- 1962	Others under age 16	
Primary Course	899	1,136	86	31	143	272	2,567 (2,665)
Re-inforcing injections	-	163	273	83	1,274	755	2,548 (2,329)

The numbers of children who received primary and re-inforcing diphtheria immunisation increased by 64 and 177 respectively in comparison with the figures for 1965. It is pleasing to note that the largest increase in primary immunisations (123) occurred in the youngest age group.

There was also an increase in the number of children who received primary whooping cough immunisation; again this increase appeared mainly in the youngest age group.

The overall number of children under 16 years of age who received primary immunisation against tetanus fell by 98, in spite of an increase of 123 in the youngest age group. Some reduction in the numbers of older children receiving primary tetanus immunisation may now be expected.



The acceptance rates for primary diphtheria immunisation as at 31.12.66. were:-

Children born in 1966	33%
Children born in 1965	73%
Children born in 1964	75%
Children born in 1963	73%
Children born in 1959-1962	72%
Others under age 16	72%

#### POLIOMYELITIS VACCINATION

There were no major changes in the scheme for poliomyelitis vaccination during 1966. Some flexibility in the recommended time-table of doses was introduced when, in May, the Ministry of Health advised that the Joint Committee on Vaccination and Immunisation had reviewed the age at which the use of oral vaccine should begin and had confirmed its previous opinion that vaccination begun at six months of age is likely to be more effective than if it were begun earlier. As there was evidence that oral poliomyelitis vaccine is reasonably effective from the age of three months onwards no objection would be raised to those who, for various reasons, would prefer to offer three doses concurrently with combined diphtheria, whooping cough and tetanus vaccine before the age of six months. It was also stated that where primary immunisation had been completed with three doses of oral poliomyelitis vaccine begun before the age of six months some doctors might consider it desirable to offer a further dose of oral vaccine at 18 to 21 months, and no objection would be raised to this. The importance of a re-inforcing dose for all previously immunised children joining school was emphasized. Where oral vaccine is used this re-inforcing dose may be given, at the discretion of the doctor concerned, at the same time as a re-inforcing dose of diphtheria and tetanus vaccine.

The following table shows the number of children under 16 years of age who received protection against poliomyelitis in 1966:-

Poliomyelitis Vaccination	Children born in years						TOTAL
	1966	1965	1964	1963	1959-1962	Others under age 16	
Primary Course	581	1,359	186	80	149	69	2,424 (2,539)
Re-inforcing Doses	-	20	43	21	1,173	165	1,422 (1,924)

The total for primary poliomyelitis vaccination shows a decrease of 115 in comparison with the 1965 total, but there was an increase of 172 in the number of primary courses of vaccination given to children in the youngest age group. The acceptance rates for primary poliomyelitis vaccination as at 31.12.66 were:-

Children born in 1966	21%
Children born in 1965	67%
Children born in 1964	70%
Children born in 1963	69%
Children born in 1962	70%

The number of children who received re-inforcing doses of poliomyelitis vaccine showed a marked decrease. This is very disappointing, as we endeavour to arrange for all previously vaccinated children to receive a boosting dose at school entry age either from their family doctors or at our own clinics. Unfortunately, many of these children fail to attend for their doses.

### VACCINATION AGAINST ANTHRAX

Local health authorities may now arrange for workers exposed to the risk of contracting anthrax because they handle certain raw materials to receive protection by vaccination. The workers mainly concerned are those in establishments such as tanneries, glue, gelatin, soap and bonemeal factories, and woollen mills. At the time of writing the Annual Report for 1965 it had been ascertained in consultation with the local H.M. Inspector of Factories that one factory in the county was handling some of the raw materials in question and arrangements had been made for 95 of the employees at the factory to commence a course of vaccination. Of these 95 employees, 68 completed the primary course of three doses, 19 received two doses, 7 received one dose and one withdrew completely.

An application for the vaccination of employees was also received from another establishment in the county where hides, wool and animal by-products are handled, and arrangements were made for 13 employees to commence a course of vaccination.

### VACCINATION AGAINST MEASLES

Ministry of Health Circular 6/66 dated 21st February, 1966, advised local health authorities that the Joint Committee on Vaccination and Immunisation of the Central and Scottish Health Services Councils had issued a report on controlled trials of measles vaccines which indicated that the vaccination schedules used in the trials were effective and acceptable procedures. The Joint Committee considered it would be premature to embark on any programme of general measles vaccination.



## A M B U L A N C E   S E R V I C E

The number of patients carried during the year totalled 82,014. This represents a decrease of 2,415 (2.85%) on the figure for 1965. The total mileage travelled including Hospital Car Service mileage was 747,810, a decrease of 8,255 miles (1.09%) on the figure for 1965. The average number of miles per patient carried rose to 9.11 from 8.96 in 1965. The decrease in both patients and mileage is almost fully accounted for by the fall in the number of trainees requiring daily transport to Sandon School consequent on the opening of the Junior Hostel at Grantham. This will be only a short term effect and it is already apparent that it will not be repeated in 1967. Additional commitments under Section 27 of the National Health Service Act, 1946, and an increased daily transport commitment to the Ambergate School at Grantham are already apparent, and it is anticipated that increased demands will be made on the service in the future. It should be appreciated that in addition to providing a service under Section 27 of the National Health Service Act 1946 for the whole of the county and three agency areas, i.e. Rutland County Council, Soke of Peterborough County Council and the Northamptonshire County Council the ambulance service transports children to training centres, special schools and clinics.

Throughout the latter part of the year staff shortages due to sickness accentuated the difficulties inherent in providing a service which, in addition to its routine day-to-day commitments, must provide an emergency service for accident and other urgent cases.

A detailed summary of the work carried out during the year appears on page 32.

### VEHICLES

The authorised vehicle complement remained at 27, including one spare vehicle. The disposition of vehicles as at the 31st December, 1966 was as follows:-

	<u>Large D.P.</u> <u>Ambulance</u>	<u>Small D.P.</u> <u>Ambulance</u>	<u>D.P. Sitting</u> <u>Case Car</u>	<u>Sitting Case</u> <u>Car</u>
GRANTHAM	3	-	4	-
STAMFORD	2	1	1	-
BOURNE	2	1	1	-
WADDINGTON	2	1	1	-
SLEAFORD	3	2	2	1
(includes one spare vehicle)				

The arrangements whereby the majority of the maintenance work (other than routine maintenance carried out by the whole-time staff) is undertaken by the staff of the County Council's Central Repair Depot at Grantham have continued unchanged throughout the year and I should like to express my appreciation of the willing help and assistance received from the Depot Officer and for his interest in the special problems connected with ambulance vehicles.

### STAFF

#### (a) Driver/Attendants.

The establishment of whole-time driver/attendants approved by the County Council remained unaltered at 45 throughout the year. This figure is inclusive of the five station officers whose appointment was approved in 1965. No occasional vacancies occurred throughout the year but the long term sickness of two members of the staff and a rising incidence of minor illness caused some difficulty from time to time. The distribution of personnel as at the 31st December, 1966 was as follows:-

	<u>Station Officers</u>	<u>Driver/Attendants</u>
Grantham	1	10
Sleaford	1	9
Bourne	1	3
Stamford	1	9
Waddington	1	9

(b) Attendants

The arrangements which were first instituted in 1948 and have continued since that time with only slight modification whereby trained voluntary attendants are available on a rota basis have continued throughout the year. The arrangements more particularly affect the Bourne, Grantham and Sleaford Stations and whilst this supplementary assistance is much appreciated, the indications are clear that the voluntary organisations are finding it increasingly difficult to provide cover for the full twenty-four hours and shortages have occurred during the year. I should like to place on record my appreciation of the assistance given by members of voluntary organisations and other individuals to the service.

The undermentioned voluntary organisations have provided assistance during the year:-

BOURNE - British Red Cross Society. St. John Ambulance Brigade.  
 GRANTHAM - British Red Cross Society.  
 SLEAFORD - St. John Ambulance Brigade. (Nursing Division)  
 Sleaford and District Voluntary First Aid and Ambulance Unit.  
 STAMFORD - St. John Ambulance Brigade. (Nursing Division)  
 British Red Cross Society (for patients travelling by rail).

STATISTICS FOR THE YEAR ENDED 31st DECEMBER, 1966.

DEPOT	AMBULANCES		SITTING CASE VEHICLES		TOTALS	
	Miles	Patients	Miles	Patients	Miles	Patients
SLEAFORD	153,272	17,952	26,303	2,021	179,575	19,973
GRANTHAM	65,736	8,715	92,588	13,160	158,324	21,875
BOURNE	29,623	2,797	48,860	5,448	78,483	8,245
STAMFORD K.C.C.	25,567	4,634	40,577	4,966	66,144	9,600
STAMFORD AGENCY	11,492	1,291	17,251	1,895	28,743	3,186
WADDINGTON	46,608	5,352	45,020	6,077	91,628	11,429
HOSPITAL CAR SERVICE	-	-	144,913	7,706	144,913	7,706
TOTALS	332,298	40,741	415,512	41,273	747,810	82,014



P R E V E N T I O N   O F   I L L N E S S ,   C A R E  
A N D   A F T E R - C A R E

TUBERCULOSIS

There is a good relationship between the chest clinics serving the area, the Health Department and the health visitors. The visiting of cases of tuberculosis by the health visitors has tended to become more selective and the number of long-term chronic cases requiring close supervision is slowly decreasing. The tracing of contacts still remains a very necessary function of the Health Department.

The provision of free milk to necessitous persons suffering from tuberculosis continues to be made when requested by the chest physicians and 20 persons benefited from this provision during 1966.

One patient maintained by the Nottinghamshire County Council on behalf of this Authority is in employment as a woodworker at the Sherwood Village Settlement where he was admitted in 1959.

Where necessary, assistance is given by the County Council's Home Help Service, to tuberculosis patients being nursed at home and two patients received help from this service during 1966. Home helps who may be required to undertake work with families where tuberculosis is present in the household are x-rayed by arrangement with the chest physician.

B.C.G. Vaccination

The vaccination with B.C.G. (Bacillus Calmette-Guerin) vaccine of children who are close contacts of known cases of tuberculosis and negative to the tuberculin skin test, is undertaken by the chest physicians as part of the clinical service to the patient and contacts. During 1966, 77 children were skin tested by the chest physicians and of these 71 gave a negative reaction and six were positive. A total of 105 children were vaccinated, a number of infants having received vaccination without first being skin tested.

Comparative figures for the last five years are as follows:-

	<u>Tested</u>	<u>Negative</u>	<u>Vaccinated</u>	
1962	91	77	82	(includes 5 not skin tested)
1963	66	37	84	(includes 47 not skin tested)
1964	106	66	95	(includes 29 not skin tested)
1965	97	88	111	(includes 14 not skin tested)
1966	77	71	105	(includes 24 not skin tested)

The scheme for B.C.G. vaccination of older children as a routine measure towards the prevention of tuberculosis commenced in Kesteven in 1959, and is now offered to schoolchildren of about 13 years of age and upwards and students attending further education establishments. The B.C.G. vaccination programme commences as soon as possible after the summer holidays each year, and it is usually well into the following year before it is completed. Since at least two visits have to be made to each school or establishment, the first for skin tests and the second for vaccinations, with the possibility of a further session to deal with previous absentees, it is difficult to carry the programme through without causing some disturbance to school routine, and I would again express my thanks to head teachers and their staffs for their kind co-operation. Positive reactors are referred to the chest physicians for follow-up as necessary.



The following are details of persons dealt with during 1966:-

	No. skin tested	Of those tested		
		Positive	Negative	Vaccinated
School Children	1,538	201	1,272	1,267
Further Education Students	6	1	4	4
TOTAL	1,544	202	1,276	1,271

#### Tuberculosis Vaccines Clinical Trial

The Tuberculosis Research Unit of the Medical Research Council has for some years conducted a trial to determine the duration of protection from tuberculosis imparted by B.C.G. vaccination in adolescence. Local health authorities help in this trial by making quarterly returns to the Tuberculosis Research Unit of all cases notified, and cases discovered only after death, in persons born in the years 1935 to 1938 inclusive. No case was notified to the Unit in 1966.

#### Long Stay Immigrants

Local health authorities were asked by the Ministry of Health at the beginning of 1965 to ensure that so far as possible all new long-stay immigrants arriving in their areas are taken on to the list of a family doctor without delay so that (if he thinks it desirable) he can arrange for them to go to a Mass Radiography Unit, chest clinic or hospital for x-ray. Our arrangements provide for the local health visitor to be informed immediately of the arrival of an immigrant in her area and she is requested to visit the person as soon as possible and give information about the available health services and, if necessary, advise the person and any dependant to register with a family doctor without delay. Fourteen long-stay immigrants giving addresses in this county as their destination arrived in the country during 1966. Contact was made with ten of these persons, but of the remainder two apparently did not arrive at the addresses given, one moved to another area before he could be seen and another, although thought to be in the area, could not be traced.

#### Mass Radiography

The Lincolnshire Mass Radiography Unit visited Sleaford and Grantham during January and April respectively, and the East Anglian Regional Hospital Board's Unit was based in the Stamford area for a period in March/April.

Reports on the surveys show that at -

1. Grantham a total of 7,348 persons were x-rayed. The findings revealed three cases of pulmonary tuberculosis requiring close clinic supervision or treatment and five others requiring only occasional clinical supervision; in addition there were two patients found to be suffering from bronchial cancer and four from other chest conditions.

2. Sleaford a total of 1,128 persons were x-rayed and one case of active pulmonary tuberculosis discovered.



3. Stamford the East Anglian Regional Hospital Board's Unit carried out a public survey in Stamford and at four industrial establishments (two in Stamford and two in the adjoining part of Rutland) in March and April. At the public survey 3,659 people attended, 2,688 of these being Kesteven residents. Three cases of tuberculosis, not previously diagnosed and not necessarily from Kesteven, were found.

A total of 1,065 persons were x-rayed at the two industrial establishments in Stamford, 802 of these being Kesteven residents. One case of tuberculosis, not previously diagnosed, was found. At the two industrial establishments in the part of Rutland adjoining Kesteven a total of 778 persons (including some relatives of employees) were x-rayed, 582 of these being Kesteven residents. No previously undiagnosed cases of tuberculosis were found.

No cases of bronchial cancer were reported from the Stamford area surveys.

### General

The Council's medical staff undertook the medical examination of 114 entrants to teachers' training colleges and 15 entrants to the teaching profession as required by the Ministry of Education and Science. Persons in the former groups are required to be x-rayed prior to the completion of their training while those in the latter group have to undergo x-ray examination before appointment to teaching posts.

### MENTAL DISORDER

Reference to the community care work undertaken amongst persons suffering from mental disorder appears on page 42 of this Report in the section dealing with the Mental Health Services provided by the Authority.

### ILLNESS GENERALLY

#### Care and after-care of Patients

When requested by general practitioners, hospitals or other agencies, the County Council continued to assist under their scheme patients being nursed at home or after discharge from hospital.

The close liaison between the Health Department's staff and the hospital staff continued during the year. The arrangements at local level for direct contact between hospital staffs and the district home help supervisors, health visitors and nurse/midwives continued to operate satisfactorily.

#### Recuperative Holidays

During the year seven patients (three male and four female) were admitted to recuperative convalescent homes for short periods under arrangements made by the County Council.

#### The Deepings and District Voluntary Laundry Service for the Sick

This service, to which detailed reference has been made in previous reports, continued to give very valuable service to elderly incontinent persons, etc., in the Deepings area.

#### Marriage Guidance Council

The County Council continued to give financial assistance to the Lincoln and District Marriage Guidance Council to assist them in their valuable work. This work is not limited to Lincoln but extends into a very wide area around the City including the northern part of Kesteven.



## NURSING EQUIPMENT AND APPARATUS

There were no changes in the Council's arrangements, as outlined in previous reports. Each district nurse has an ample stock of the smaller items of loan equipment, while the British Red Cross Society and the St. John Ambulance Brigade who administer the Medical Loan Depots on behalf of the County Council, have, with the aid of grants from the County Council, continued to add to their own comprehensive stocks of articles.

DEPOT	NO. OF ISSUES MADE	NO. OF INDIVIDUAL CASES WHO BENEFITED
Bourne	148	116
Grantham	489	427
Stamford	238	198
Sleaford	401	252
TOTALS	1,276	993

## DENTAL - FLUORIDATION OF WATER SUPPLIES

Kesteven was one of the first local health authorities in England and Wales to agree to the making of arrangements with its water undertakings for the addition of fluoride to water supplies which are deficient in it naturally.

It is an essential pre-condition that where a water board supplies more than one area, unanimity of agreement on fluoridation must have been reached by all the local health authorities involved before the board is able to proceed with the treatment of its supplies. It would be impracticable to supply fluoridated and non-fluoridated waters to different local authority areas.

Kesteven receives water from three different water boards. Two of these boards also supply other areas outside Kesteven and have already intimated that they are at present unable to proceed with fluoridation as not all our neighbouring authorities have yet endorsed this measure. The third board which supplies areas in Kesteven only has agreed to fluoridate its water, and a scheme to bring this about was submitted to the Ministry of Health early in 1966. This, however, proved unacceptable to the Ministry and an alternative scheme is being prepared by the Water Board.

## CHIROPODY

There were no changes in the Council's arrangements for a chiropody service in the county for the priority groups recommended by the Ministry of Health.

Treatment is available to women of 60 years and over, men of 65 years and over, physically handicapped persons and expectant mothers. The service is provided through the old people's clubs and other voluntary organisations and they receive financial assistance from the County Council. There is also a County Council clinic at Grantham. A charge of 2/6d. per treatment is made except in cases of financial hardship, when the treatment is given free of charge. Treatments are also given to residents in old people's homes.

At the 31st December, 1966, 47 clubs were operating a chiropody service compared with 44 at 31st March, 1966 and 37 at 31st March, 1965. During 1966, 1,290 persons made a total of 7,696 attendances for treatment, compared with 1,353 patients and 6,682 attendances for treatment during 1965/66, and 1,214 patients and 4,833 attendances for treatment during 1964/65.



The following is an analysis of the persons treated and treatments given during 1966 through the old people's clubs and other voluntary organisations:-

	<u>No. of persons treated</u>	<u>No. of treatments given</u>
Women aged 60 years and over	961	5,835
Men aged 65 years and over	267	1,494
Expectant mothers	-	-
Physically Handicapped	62	367
	<u>1,290</u>	<u>7,696</u>

The scheme which the County Council operates directly at the Beaconfield Clinic, Grantham has continued to work well. During 1966, the chiropodist in attendance undertook 94 sessions at which 130 individual patients were treated. Attendances for treatment totalled 524.

### HEALTH EDUCATION

There is a continuing demand for our medical, dental and nursing staff to give talks at schools, welfare centres, mothercraft and relaxation classes, young wife's groups, Women's Institutes etc., and increasing use is being made of the Department's sound film projectors. A number of requests have been received from women's organisations for talks on cancer of the cervix and we are grateful to the Cancer Information Centre for the use of the film "Time and Two Women", with supporting literature.

Selected items of publicity material in the form of posters and leaflets were obtained during the year from the Ministry of Health, the Central Council for Health Education, the Royal Society for the Prevention of Accidents and from other organisations concerned with the promotion of health. The County Council continues to contribute to the Central Council for Health Education and the Royal Society for the Prevention of Accidents.

The monthly journal "Better Health", published by the Central Council for Health Education is obtained for our medical officers, health visitors, school nurses and voluntary workers at infant welfare centres and for others whose daily work brings them into contact with mothers and children.

The Family Doctor publication "You and Your Baby" is freely available to all mothers attending our clinics and infant welfare centres.

### SMOKING AND HEALTH

The number of deaths in the county from lung cancer in 1966 was 54, (46 males and 8 females), three more than in 1965. The death rate from lung cancer was 0.36 per 1,000 of estimated population and remains below the average rate for England and Wales which in 1963, 1964 and 1965, was a little more than 0.5 per 1,000 of estimated population.

Selected anti-smoking propaganda material was obtained during the year for display in the County Council's Clinics and for distribution to schools by the County Education Department.

I am indebted to Dr. J.B. Wilkinson, Chest Physician for the following report on the experimental anti-smoking clinic which he instituted at the Grantham and Kesteven General Hospital in October 1964:-

"The figures for the Anti-smoking Clinic held on Thursday evenings at Grantham Hospital have been disappointing. Only twelve cases in all were referred during the year under review. So far the Clinic has relied on General Practitioners as the source of patients, but it would seem that the field will have to be widened in future if a larger number of cases are to be seen.

"An encouraging trend is that seven of these twelve cases were under forty and of these five so far have had a good result, i.e. stopped altogether or now only smoke an occasional cigarette. In all, six had a good result, five made no improvement, and one cut the amount by half."

#### EXFOLIATIVE CYTOLOGY

The position at the end of 1965 with regard to the taking of smears for examination to exclude cancer of the cervix was that the Lincoln City cytology clinic was dealing regularly with a number of cases from the North Kesteven area and the County Council had agreed to pay the City a fee for each Kesteven resident examined. Some family doctors in the county were also undertaking the examination for a limited number of their patients. The various hospitals whose job it would be to examine smears taken at clinics in this county had indicated that it was not practicable at that time to entertain a general scheme for the county owing to the shortage of trained technicians and laboratory facilities, but that it would be possible to co-operate in a small way at first and extend the facilities as more trained staff became available. Plans were therefore in hand for the establishment of cytology clinics at Grantham, Sleaford and possibly Stamford.

I am pleased to report that the first cytology clinics in the county commenced weekly sessions at the Beaconfield Clinic, Grantham and the Riversdale Clinic, Sleaford, on the 18th and 23rd May respectively, taking six patients at each session.

On the 8th September a further cytology clinic taking six patients at each session commenced to operate on a twice monthly basis at the Barnhill Clinic, Stamford. There were soon waiting lists for appointments at each of the clinics and a full case-load was dealt with at each session up to the end of the year. The pathologist at Lincoln County Hospital indicated that he would be able to deal with 12 smears weekly from the Grantham and Sleaford clinics in December. It did not at that time appear that there was any likelihood of the numbers of smears taken at the Stamford clinic being increased as the cytology technicians at the pathology department of the Peterborough Memorial Hospital were already working to capacity.

Details of attendances at the cytology clinics held during the year are as follows:-

CLINIC	No. of Patients (1)	Total No. of Smears (2)	No. of repeat Smears taken included in (2) (3)	No. of Positives (4)
Beaconfield, Grantham	222	227	5	1
Riversdale, Sleaford	195	200	5	2
Barnhill, Stamford	48	49	1	-
Total	465	476	11	3

In addition, 285 smears were taken at the Lincoln Cytology Clinic from women resident in North Kesteven. A positive reading was reported in one case.



# B L I N D   P E R S O N S

The following information relating to blind persons in the county supplied by the County Welfare Officer has been included in this report at the request of the Ministry of Health.

The table below gives details of blind and partially sighted persons on the County Council's register during the year ended 31st December, 1966:-

	(i) <u>Blind</u>	(ii) <u>Partially-</u> <u>sighted</u>
(a) Registered at 1st January, 1966	316	97
(b) New registrations during the year	53	19
(c) De-certified cases re-registered	2	-
(d) Deaths	37	8
(e) Transfers to other areas	7	2
(f) Transfers from other areas	3	2
(g) Transfers from blind to partially-sighted category included in (b) (ii) above	3	-
(h) Transfers from partially-sighted to blind category included in (b) (i) above	6	6
(i) Recovered sight	2	-
(j) Registered at 31st December, 1966	325	102

The age groups of the persons newly registered during the year were as follows:-

0 - 15 years	1
16 - 59 years	5
60 - 69 years	12
70 - 79 years	24
80 years and over	30
	<u>72</u>

The proportion of newly registered persons aged 60 years and over represents 92% of the new registrations as against 85% in the previous year.

(i) Number of cases registered during the year in respect of which para. 7(c) of Forms B.D. 8 recommends:	Causes of Disability			
	Cataract	Glaucoma	Retrolental Fibroplasia	Others
(a) No treatment	6	3	-	38
(b) Treatment (medical surgical or optical)	10	5	1	9
(ii) Number of cases at (i)(b) above which on follow-up action have received treatment	10	5	1	9

## OPHTHALMIA NEONATORUM

No case of this disease was notified in Kesteven under the Public Health (Ophthalmia Neonatorum) Regulations, 1926/37.

## H O M E   H E L P   S E R V I C E

The statistics of the Home Help Service given on page 67 show the continued expansion of the service which follows the pattern of previous years.

A total of 995 cases was helped during the year, 740 cases were in the over 65 age group. Of these 740 cases 240 were helped for the first time during the year.

Maternity cases showed an overall increase from 47 during 1965 to 59 during 1966. Although the Stamford area showed a decrease from 21 to 12, the rest of the areas showed a marked increase, especially in the fringe area of Lincoln City, where there continues to be a shortage of hospital beds.

The number of hours covered by the service during the year was 132,741 - an increase of 911 hours on the 1965 figure.

### DISTRICT SUPERVISORS

There have been no changes in staff during the year, and the three officers responsible for the field work have once more done splendid work. They covered 995 cases in the county, plus 70 cases under the Good Neighbour Service and also dealt with requests for night attendants when required.

### HOME HELPS

The number of home helps employed increased from 161 during 1965 to 183 during 1966. This is a very encouraging feature, as the biggest single problem with the operation of the service is recruiting suitable women who are prepared to be home helps.

### GOOD NEIGHBOUR SERVICE

This service continues to fill a very vital need in the care of the aged. Seventy cases were covered during the year, and these were mainly in the isolated villages where help is extremely difficult to obtain. Good neighbours are usually in the 55 - 65 year age group, and so the service fills a dual role, both in providing the good neighbours with useful and rewarding work and the recipient with a woman that he or she knows and can rely on to care for them.

### NIGHT ATTENDANCE SERVICE

During the year the pay for night attendants was increased from 12/6d. a night to 30/- and this has enabled us to recruit more women willing to undertake this work. We were able to send help on 75 nights, a considerable increase over previous years when the average was only 10 nights in any one year.

I would like to thank the voluntary organisations for their help in reporting cases of need to the service, and especially the "Meals on Wheels" Service whose help in supplying mid-day meals to the housebound is invaluable.



GENERAL

The service has continued to grow and gain the confidence of the general public.

Sandon School has continued to attract many visitors. The setting up of a temporary workshop for the senior girls in one of the playrooms at the hostel has given the school an opportunity of fulfilling the role for which it was originally provided, that is to give training to sub-normal children.

Mental Health Week provided an opportunity for the school to organise its most ambitious project - an exhibition in the Public Library at Grantham. The exhibition was attended by over 1,200 people.

ADMINISTRATION

(a) Sub-Committee

The administration of the Mental Health Service in the county continued to be dealt with by the Mental Health, Maternity and Child Welfare and Care Sub-Committee, which consists of 20 members and meets four times a year.

(b) Staff - Medical

The County Medical Officer is the chief executive officer of the Mental Health Service and is also an approved officer for examination for mental illness under Section 28(2) of the Mental Health Act, 1959. The Deputy and Assistant County Medical Officers, the Consultant Psychiatrists at Rauceby, St. John's and Harmston Hospitals and three general practitioners are also approved under the Act. Dr. E.A. Whiteley, Deputy County Medical Officer, is medical officer for the Training Centre and has a special responsibility in connection with the care of the mentally disordered in the community.

(c) Staff - Non-Medical

There have been no major changes in staff during the year although illness has necessitated a temporary re-arrangement of duties. The service continues to be operated by four full-time mental welfare officers working under the Senior Mental Welfare Officer based at County Offices. The staff at Sandon School consists of the supervisor and four assistant supervisors (one with the N.A.M.H. Diploma) working under a fully trained supervisor. The adult trainees work under a qualified instructor and an assistant supervisor.

Training

During the year, Mr. H. Blower who has been appointed Head Supervisor at the Adult Training Centre now under construction, successfully completed the National Association Course for Instructors of Adult Subnormals and gained his diploma. Mr. J.T. Cobb, instructor in the workshop commenced a similar course at Kingston-upon-Hull College of Commerce. Mental Welfare Officers regularly attend case conferences, clinics and ward rounds at the hospitals.

Sandon School has received students from the National Association and the Kingston-upon-Hull courses and the increasing interest in mental health is shown by the requests by many organisations for talks by our officers.

Co-ordination

Co-ordination between the Authority, the Regional Hospital Board and Hospital Management Committees continued to be satisfactory. A Liaison Committee has been set up on which the Authority has two representatives. Co-ordination with statutory and voluntary bodies is maintained and mental welfare officers attend co-ordinating meetings in their respective areas.

WORK UNDERTAKEN IN THE COMMUNITY

Psychiatric Cases

Admissions to Hospitals

The following table - drawn up from notifications received - shows the number of patients from the Kesteven area admitted to psychiatric hospitals during the year under the Mental Health Act, 1959. Comparative aggregate figures for the preceding two years are also given:-

Category	Rauceby Hospital	St. John's Hospital	Other Hospitals	Total 1966	Total 1965	Total 1964
Section 5 (Informal)	223	28	3	254	259	262
Section 25 (Observation)	14	13	2	29	12	18
Section 26 (Treatment)	2	3	-	5	5	4
Section 29 (Emergency)	34	12	2	48	57	47
Section 60	1	-	-	1	1	3
TOTALS	274	56	7	337	334	334

The proportion of women admitted to hospital was 60% of the total. The following table analyses the figures on a sex and age basis:-

		Under 20	20-29	30-39	40-49	50-59	60-69	Over 70	Age not given	Total
MALE	1966	10	11	15	33	28	17	14	6	134
	1965	10	19	14	22	8	15	12	5	105
	1964	21	24	26	16	18	12	19	7	142
FEMALE	1966	8	33	28	48	19	20	33	14	203
	1965	14	38	39	44	27	25	40	2	229
	1964	9	34	29	33	32	21	24	10	192
TOTALS	1966	18	44	43	81	47	37	47	20	337
	1965	24	57	53	66	35	40	52	7	334
	1964	30	57	55	49	50	33	43	17	334

Regrading in Hospital of Patients admitted for Observation

Admitted for Observation	Regraded			Discharged
	Section 5	Section 25	Section 26	
(48 Section 29)	13	27	6	2
78 (30 Section 25)	23	-	-	7

Of the 27 regraded to Section 25 from Section 29, 21 continued treatment on an informal basis on the expiration of the order.



In previous reports admissions have been analysed in various ways and for the last two years the elderly have been closely scrutinised. Special attention to the prevention of mental illness among this age group has been paid by the mental welfare officers and the co-operation of some of the local housing authorities in providing accommodation in grouped dwellings and the like has resulted in delaying and in some instances avoiding the need for admission to hospital. The number of actual admissions known to the Authority are slightly down on last year as seen by the following tables:-

	Hospital	Aged 60-69 Years	Aged 70 and Over	Admissions of all other ages
Male	St. John's Rauceby	2 15	- 14	14 82
Female	St. John's Rauceby	- 20	5 28	35 115
TOTALS		37	47	246

1966 - 84 admissions aged 60 years and over - 25% of all admissions

1965 - 92 admissions aged 60 years and over - 27% of all admissions

1964 - 76 admissions aged 60 years and over - 23% of all admissions

These figures indicate that since the inception of the Mental Health Act, 1959, the percentage of admissions of persons over 60 years of age in Kesteven has remained reasonably constant and that the admission rate of all cases to hospitals (as shown below), irrespective of age, remains well below the national average (3.3 per thousand) in this county:-

1966 - 2.3 per thousand

1965 - 2.4 per thousand

1964 - 2.3 per thousand

#### Discharges from Hospitals

During the year, 260 discharges from psychiatric hospitals were notified to the Local Health Authority and after-care service was accepted by 148 patients; the respective figures for 1965 were 297 and 203. Fourteen patients had two admissions to hospital and fifteen three admissions.

The pattern of diagnosis of the mental illness of patients remained very similar to previous years, the anxiety and depressive illnesses remaining the most numerous. An analysis together with comparative figures for the previous two years is as follows:-

Diagnosis	Male	Female	Total	Percentages		
				1966	1965	1964
Manic Depressives						
Depressives						
Anxiety State						
Melancholia	48	75	123	47	45	47
Paraphrenia						
Paranoia						
Schizophrenia	25	35	60	23	24	27
Hypochondria						
Hysteria						
Obsessional Neur.	5	16	21	8	7	5
Psychopaths						
Alcoholism	7	3	10	4	3	4
Epileptic						
Arteriosclerosis						
Senile Dementia	13	15	28	11	12	12
Somatic						
Subnormality	3	5	8	3	2	1
Unspecified	3	7	10	4	7	4
TOTALS	104	156	260			



## PREVENTION, CARE AND AFTER CARE

There has been an increase in preventive work undertaken by mental welfare officers. This work is very time consuming and demanding. An interesting feature of the table showing the source of referrals as printed below is the big increase of patients referred to the Department by the general practitioners.

Source of Referrals	Mental Illness				Psychopathic				Subnormal				Severely Subnormal				Total
	Under 16		Over 16		Under 16		Over 16		Under 16		Over 16		Under 16		Over 16		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
General Practitioners	-	-	85	153	-	-	-	-	-	-	-	-	-	1	1	-	240
Hospitals	-	-	43	101	-	-	-	-	-	-	-	3	-	-	-	-	147
Out Patient Clinics	-	3	16	46	-	-	-	-	-	-	-	1	-	-	-	-	66
L.E.A.	-	-	-	-	-	-	-	-	1	2	-	-	3	-	-	-	6
Police & Courts	1	1	10	12	-	-	-	-	-	-	-	-	-	-	-	1	25
Others	-	-	37	43	-	-	2	-	5	3	4	8	2	2	-	-	106
Totals	1	4	191	355	-	-	2	-	6	5	4	12	5	3	1	1	590

Total for 1965 - 632

Total for 1964 - 605

Details of visits in respect of these referrals are given in the following table:-

	Number of Visits		
	1966	1965	1964
Patients in Hospital	620	520	425
O.P. Clinics	109	138	90
Patients at home	975	634	470
Relatives, etc.	1,174	789	634
After-Care	1,440	1,292	1,230
Prevention Cases	598	342	233
TOTALS	4,916	3,715	3,082

## SUBNORMALITY

The work carried out in the community by the mental welfare officers continued to grow and during the year 38 new cases were added to the register. During the year two of the youths formerly attending the workshop and one who attended the Lincoln centre obtained full-time employment and are now able to support themselves.

The sources of referral of the new cases were as follows:-

	1966	1965	1964
Transfers from other Authorities	6	7	3
Mental Welfare Officers	1	-	-
N.A.B.	4	1	7
Hospitals	7	1	4
L.E.A.	5	5	8
Others	15	18	15
	38	32	37



The referrals were dealt with as follows:-

Placed under Community Care	-	37
Direct admission to hospital	-	1
		<u>38</u>

Of the 23 cases deleted from the register, 14 were formerly under supervision and 9 in hospital. Of the 14 under supervision, 13 left the area and one died, and of the 9 cases in hospital, five left the area and four died.

During the year 12 cases under supervision in the community were admitted to hospital, making the total admissions to hospital from this Authority 13. Four patients were discharged from hospital into the community.

Twenty-five admissions for temporary residential care were arranged during the year to afford relief to the parents.

The following table shows the number of subnormals on the register at the end of the year:-

	Subnormal				Severely Subnormal				Totals				Grand Total
	Under 16		16 and over		Under 16		16 and over		Under 16		16 and over		
	M	F	M	F	M	F	M	F	M	F	M	F	
A. <u>Under Community Care</u>													
(a) Attending day training centres	15	6	7	7	12	14	10	10	27	20	17	17	81
Awaiting entry thereto	1	3	-	-	1	-	-	-	2	3	-	-	5
(b) Receiving home training	-	-	-	-	-	-	-	-	-	-	-	-	-
(c) Resident in Local Authority Homes	-	-	2	5	-	-	14	4	-	-	16	9	25
(d) Receiving supervision	13	5	82	81	1	-	31	23	14	5	113	104	236
Totals	29	14	91	93	14	14	55	37	43	28	146	130	347
B. <u>In Hospitals</u>	8	4	36	41	14	5	62	51	22	9	98	92	221
Numbers as at 31.12.66 (Totals A & B)	37	18	127	134	28	19	117	88	65	37	244	222	568
Numbers as at 31.12.65	33	15	118	128	31	19	101	85	64	34	219	213	530

At the end of the year there were 17 cases awaiting admission to hospital, of which nine were classified as 'urgent'.

As in previous years selective visiting has been maintained - frequent visits being paid to those requiring support to maintain them in the community and only a single visit to those who are self-supporting and living an independent life. The following table gives details of the visits made:-

	<u>1966</u>	<u>1965</u>	<u>1964</u>
To subnormals in hospitals	21	40	37
In the community	744	575	667
To employers	57	121	245
For reports to hospitals	3	2	5
Enquiries and other visits	418	396	288
	<u>1,243</u>	<u>1,134</u>	<u>1,242</u>

## TRAINING OF SUBNORMALS

### Sandon School

The number of children on the register at Sandon School at the end of the year was 68 - 31 sixteen years of age and over and 37 children under sixteen years of age. During the year arrangements were made for the senior girls to be separated from the school environment and one of the playrooms in the adjacent hostel was converted into a temporary workroom. With the senior boys already established in the workshop only juniors were left at the school.

Mrs. Surridge the Supervisor in her report on Sandon School states that 1966 proved to be a full and stimulating year.

Two junior pupils were transferred to Ambergate E.S.N. School and one to Hawksworth Hall (spastic residential assessment centre.)

Medical examinations for all trainees were held in June by Dr. Mould and dental examinations were carried out each term.

Numerous visits of observation were made by the trainees.

Three students from the N.A.M.H. Diploma course in Sheffield did their teaching practice at Sandon School and were successful in their examinations.

Groups of students from Grantham Hospital, Stoke Rochford Training College and Grantham Technical College, visited the school.

In July a group of 25 students who had just successfully completed their N.A.M.H. Diploma course at Sheffield, with their tutor, Mrs. M. Lettice, spent a day at the centre.

### Mental Health Week - 3rd to 11th June

During this period, our most ambitious project was attempted. An exhibition of art, handwork, handicrafts and cookery was held in the Art Room at the Grantham Public Library, and over 130 different items of work were on view. The exhibition aroused great interest among the public and local press. A total of 1,219 people visited the exhibition.

The School was open from 10 a.m. to 3 p.m. on 8th June to the public to see the pupils in their training environment and approximately 150 people visited.

Mr. Blower in his report on the workshop activities comments on the good attendance record of the trainees except in November and December.

During the year one trainee was placed in employment for a period of several months but was declared redundant when the selective employment tax came into force and was readmitted to the training centre. Another trainee left the district and is now in employment in the London area.

Two new trainees have been accepted during the year.



Since September a new programme of training has been developed which emphasises social education, occupational training and group discussion.

The sale of goods from the Centre increased towards the end of the year.

Workshop practices are now beginning to be effective and this is shown by the fact that there is a greater incentive, a continual application to the job in hand and a keen desire to follow work through.

Several visits of observation have been made; some to firms to gain a practical knowledge and familiarity with conditions and methods of working in industry. The most recent visit was to a light engineering plant. These visits will continue to a wider range of industries. They are of benefit to the trainees and also give employers an opportunity to become conversant with our aims.

Periods are set aside each week for physical education.

During the period before Christmas a student from the Hull Training Course for Teachers of the Mentally Handicapped undertook teaching practice at the workshop.

Other individuals and groups have visited the workshop.

Full co-operation has been maintained with Sandon School.

### The Beacon

The Beacon - a hostel for subnormal children under the age of 16 years - was opened on 2nd November, 1965. It is used mainly as a hostel for children living in isolated places who attend Sandon School and they are resident from Monday to Friday, spending the weekends and holidays at home. Children are accommodated for short periods in the event of sickness and emergencies at home or to give parents a rest. The hostel, built to provide accommodation for 20 children, opened with 6 children and gradually over a six month period this number increased to 19.

During the year the hostel has provided short term care for 17 subnormals for periods varying from 2 to 25 days - some of the children requiring special care.

Mr. Collinson, the Warden, reports that most of the children admitted to the hostel settled down well and that the majority have shown a marked improvement in behaviour and habits. All appear to be happy and a happy and contented atmosphere prevails.

The staff consists of Warden and Matron, Assistant Matron and two Children's Assistants. There was one change during the year when Mrs. Roche resigned to take a post of Assistant Supervisor at the School. There were some staffing difficulties during the year on the domestic side.

Since Whitsun the hostel has provided workroom accommodation during the day for 15 senior girls - one of the playrooms being converted for this purpose.

### Sandon Social Club

This continues to be very popular amongst the trainees at Sandon School. Attendances have varied from as little as 12 during some winter evening meetings to double that figure on the better nights. The club continues to meet every Wednesday evening during term time - the main activities being individual and team games and dancing.

The club continues to be run and supervised by the majority of the members of the mental health staff with two acting as organisers on duty each week. Two members of staff from Sleaford attend most weeks as they provide the transport home for the Sleaford members. Two outside volunteers have also offered their services and have accepted duties on the rota. The refreshment problems have eased considerably. The Parents Association and Round Table organisations originally shouldered most of the burden but 18 organisations have now volunteered their help and organise the refreshments on a rota basis.

Social training for members is the chief object of the club and this year we have been especially fortunate that students from the Kesteven College of Education at Stoke Rochford have attended meetings. This has proved invaluable for the members have been able to meet, mix and play with normal students.

The highlights of the year were the annual visit to the Allan House Training Social Club at Boston in July, the return visit of the Boston Club to Grantham in September and an outing to Nottingham to see the "Black and White Minstrel Show".



P R E V A L E N C E   O F   A N D   C O N T R O L   O V E R  
I N F E C T I O U S   D I S E A S E S

One thousand five hundred and seventy cases of infectious diseases (excluding tuberculosis) were notified to the District Medical Officers of Health during 1966. Particulars of these cases and their distribution appear in Table VII on page 68 of this Report. Totals for the previous five years were:-

1961 - 2,484 cases  
1962 - 905 cases  
1963 - 2,243 cases  
1964 - 2,045 cases  
1965 - 1,610 cases

The notification rates per 1,000 total population for 1966 were as follows:-

Scarlet Fever	0.86
Measles	8.26
Whooping Cough	0.28
Acute Pneumonia	0.33
Dysentery	0.68
Erysipelas	0.01
Meningococcal Infection	0.01
Food Poisoning	0.01

SCARLET FEVER - One hundred and twenty-nine cases were notified as compared with 64 in 1965 and an average of 91 during the years 1956 to 1965.

MEASLES - One thousand two hundred and thirty-six cases of measles were notified during the year. One death from measles occurred in a female aged 65 years, in the Urban District of Bourne. The number of cases of measles and deaths from the disease during the past ten years are shown below:-

<u>Year</u>	<u>Cases</u>	<u>Deaths</u>
1957	2,433	1
1958	2,217	-
1959	1,541	-
1960	226	-
1961	2,138	-
1962	403	-
1963	1,728	-
1964	1,799	-
1965	1,415	-
1966	1,236	1

WHOOPING COUGH - Forty-two cases were notified during the year, compared with 34 cases in 1965 and an average of 152 during the years 1956 to 1965.

ACUTE PNEUMONIA - Only Acute Primary and Acute Influenzal Pneumonias are notifiable and 49 cases within these categories were notified during 1966, compared with 64 in 1965 and 44 in 1964. Deaths from all forms of pneumonia numbered 120.

PUERPERAL PYREXIA - The seven cases notified in 1966 represent a notification rate of 2.49 per thousand births (live and still). The average number of notifications received during the previous five years was 8.

DYSENTERY - One hundred and two cases of dysentery were notified during the year. A mild outbreak of the disease which occurred at the Grantham Day Nursery in February accounted for a large proportion of this number and the nursery was closed for two weeks.

ERYSIPELAS - Two cases were notified.

MENINGOCOCCAL INFECTION - One case was notified.

FOOD POISONING - Two cases were notified.

I am pleased to report that no cases of diphtheria or poliomyelitis occurred in the county during the year.

### T U B E R C U L O S I S

The following table gives details of the movement of cases on and off the Register during the year, and the state of the Register at the 31st December, 1966:-

	Respiratory		Non-Respiratory		Total	
	M	F	M	F	M	F
No. of persons on Register at 31.12.65.	204	142	21	30	225	172
<u>Cases added to Register during 1966</u>						
Formally notified	15	9	1	1	16	10
Transferred from other areas	3	3	-	2	3	5
	222	154	22	33	244	187
<u>Cases removed from Register during 1966</u>						
Died	5	3	-	-	5	3
Removed from area	2	3	1	1	2	4
Removed at Annual Register Check	22	15	-	1	23	16
No. of persons on Register at 31.12.66	193	133	21	31	214	164

The age groups of cases placed on the Register and of persons who died from tuberculosis during 1966 are as follows:-



Age Groups	Cases placed on Register				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M	F	M	F	M	F	M	F
Under 1 year	-	-	-	-	-	-	-	-
1 - 4 years	-	-	-	-	-	-	-	-
5 - 14 years	-	2(1)	1	-	-	-	-	-
15 - 24 years	3(2)	3	-	-	-	-	-	-
25 - 44 years	3	4(2)	-	-	-	-	-	-
45 - 64 years	9(1)	2	-	2(2)	-	-	-	-
65 - 74 years	3	1	-	-	2	-	-	-
75 and over	-	-	-	1	-	2	-	-
TOTAL	18(3)	12(3)	1	3(2)	2	2	-	-

N.B. Cases transferred from other authorities are included in the main figures and also shown separately in brackets.

The following table shows new cases (including inward transfers) coming to the notice of the County Health Department during the last five years:-

<u>Year</u>	<u>Respiratory</u>	<u>Non-Respiratory</u>	<u>Total</u>
1962	50	7	57
1963	37	9	46
1964	45	11	56
1965	33	6	39
1966	30	4	34

The four deaths from respiratory tuberculosis represent a mortality rate of 0.03 per thousand of the total population. Comparative information relating to the deaths from tuberculosis during the last decennium is given below:-

	Respiratory Tuberculosis		Non-Respiratory Tuberculosis	
	No. of Deaths	Death Rate	No. of Deaths	Death Rate
1957	11	0.08	1	0.01
1958	6	0.04	2	0.01
1959	8	0.06	1	0.01
1960	2	0.01	2	0.01
1961	4	0.03	-	0.00
1962	4	0.03	-	0.00
1963	7	0.05	2	0.01
1964	3	0.03	-	0.00
1965	3	0.02	-	0.00
1966	4	0.03	-	0.00

It was not necessary to take any action under the Public Health (Prevention of Tuberculosis) Regulations, 1925 (relating to persons suffering from respiratory tuberculosis, employed in the milk trade), or under Section 172 of the Public Health Act, 1936, (relating to the compulsory removal to hospital of persons suffering from tuberculosis).

Reference is made to the services provided for the welfare of tuberculous patients in the section dealing with the County Council's Scheme for the Prevention of Illness, Care and After-Care on page 33.

## V E N E R E A L   D I S E A S E S

Arrangements for the diagnosis and treatment of persons suffering from venereal diseases continued as hitherto. Clinics staffed by specialists in venereology are attached to the out-patient departments of most large general hospitals in the United Kingdom. These clinics exist to advise and help patients and to control the spread of disease, by investigation of all cases in which genital infection is suspected, by prompt treatment of patients and infected contacts and, by follow-up to establish that treatment has been successful. One of the most important functions of a clinic is to act as a centre for investigation, advice and reassurance of individuals who are anxious about infection but who are not in fact infected.

Advice, treatment and attendance at these special clinics is entirely free and confidential and patients may attend without making an appointment and without a doctor's letter.

The addresses of the nearest venereal disease clinics and the times of opening are displayed on our clinic notice boards, and the Head Postmasters in the area have been very helpful by arranging for this information to be displayed in the post offices under their jurisdiction.

The following table, compiled from returns submitted by the physicians in charge of the special treatment centres in this area, shows the number of Kesteven patients who attended for the first time during 1966:-

	Syphilis	Gonorrhoea	Other Conditions	Total No. of Attenders
Nottingham	-	1	3	4
Grantham	-	5	22	27
Lincoln	-	4	30	34
Peterborough	1	9	25	35
TOTAL	1	19	80	100

The total numbers of persons seen at the clinics serving the area in each of the last ten years were as follows:-

1957	-	85
1958	-	84
1959	-	96
1960	-	123
1961	-	81
1962	-	84
1963	-	103
1964	-	109
1965	-	126
1966	-	100

Dr. D.O. Stevenson, Consultant Venereologist at the Lincoln, Grantham and Boston clinics reports - "There has been a considerable drop in the total new cases and in gonorrhoea. There were no new cases of syphilis. From the Public Health point of view the infectious female is of much more consequence than the male, and of the females with gonorrhoea one was infected in Spain, another before she came to this area and the third worked in a transport cafe although no history of infection could be obtained. I think the position can be considered very satisfactory."



# I N S P E C T I O N   A N D   S U P E R V I S I O N O F   F O O D

## FOOD HYGIENE (GENERAL) REGULATIONS, 1960

As in previous years the County Health Inspector continues to inspect all County Council premises in which catering is carried out. Forty-one inspections were made for this purpose. In addition, the County Health Inspector carries out inspections of food supplied to County Council establishments and during the year he condemned 374 pounds of food as unfit for human consumption. This consisted of beef, mutton, fish and bacon.

## MILK AND DAIRIES

### Milk (Special Designation) Regulations, 1963

Throughout the year the administration of the above Regulations continued satisfactorily. 141 visits were made to premises of milk dealers in connection with these Regulations, including frequent visits to the pasteurisation dairy within the county. 284 samples of milk were obtained from milk dealers and submitted for bacteriological examination.

Particulars are set out in the table as follows:-

District in which samples taken	Number Sub-mitted	PASTEURISED			UNTREATED			STERILISED	
		Passed	Failed	Void *	Passed	Failed	Void *	Passed	Failed
Grantham M.B.	74	72	1	-	-	-	-	1	-
Stamford M.B.	30	19	-	-	11	-	-	-	-
Sleaford U.D.	22	18	-	-	2	1	-	1	-
Bourne U.D.	28	13	-	3	11	-	1	-	-
North Kesteven R.D.	37	10	-	-	22	2	3	-	-
South Kesteven R.D.	33	19	-	3	8	3	-	-	-
East Kesteven R.D.	24	17	-	-	7	-	-	-	-
West Kesteven R.D.	36	19	-	-	15	2	-	-	-
Totals for County	284	187	1	6	76	8	4	2	-

\* Methylene Blue Test only.

The renewal of milk licences for a further five yearly period was completed and at the end of the year the number of milk dealers approved and registered by the County Council was 122. In addition to these, there were also 23 producer/retailers of untreated farm bottled milk in Kesteven who are registered by the Ministry of Agriculture, Fisheries and Food. This is a reduction of four when compared with 1965. In addition there are a number of dealers who retail milk within Kesteven but who are situated outside the county.

### Biological Milk Sampling

During the year 97 samples of untreated milk were submitted for biological examination. One proved positive to brucellosis and a herd investigation was carried out. In this connection, 228 quarter samples were taken involving 57 cows. The milk from six cows was found to be infected and as a result the cows were removed from the herd concerned. Particulars of samples taken are given in the table following:-

No. of Samples Taken	No. of Herds Involved	Tubercle Bacilli		Brucellosis	
		Positive	Negative	Positive	Negative
97	33	NIL	97	1	96
No. of herds investigated		-		1	
No. of cows samples		-		57	
No. of samples examined		-		228	
No. of cows found infected		-		6	

#### Antibiotics in Milk

During the year the sampling of raw milk supplies for the presence of antibiotics continued. Twenty-four samples of milk were submitted for examination, one of which was found to be unsatisfactory. This matter was investigated with the dairy concerned. It was denied that antibiotics had been used in connection with mastitis but one cow had received treatment for foul of foot.

#### Milk and Dairies Acts and Orders

I am indebted to Mr. R. Ford, the Divisional Veterinary Officer, for the following report:-

"During 1966 no reports were received of tuberculous milk. In Kesteven 645 herds involving 37,267 cows were tuberculin tested revealing 11 reactors (in three herds) with tuberculosis at post mortem examination. Four of these infected animals were found in one dairy herd, but the others were in imported Irish fattening cattle.

"At 31st December, 1966 in Kesteven there were 285 dairy and 1,013 beef producing herds.

"No cases of anthrax were experienced last year as compared with two the previous year.

"Salmonellosis in calves continues to be prevalent and all cases of *S. typhimurium* in calves are reported to your department as a routine."

#### Milk in Schools Scheme

During the year 20 licenced dealers supplied pasteurised milk to 185 schools. Twenty-one samples of milk were submitted for examination and all were found to be satisfactory.

Early in the year a complaint was received from a school concerning a bottle of school milk which had been delivered in a very dirty condition. Legal proceedings were instituted and a conviction against the dairy was obtained. This action followed similar complaints and warnings to the dairy during the previous year.

#### FOOD AND DRUGS ACT, 1955

The provisions of the Food and Drugs Act, 1955, insofar as they relate to the chemical composition and adulteration of food and drugs are in this county, administered by the Weights and Measures Inspector, Mr. E.T. Hawley. I am therefore indebted to Mr. Hawley for the following information:-

#### Sampling

During the year under review, 429 samples were obtained. Table A below shows how these samples were spread through the principal rural areas and urban divisions of the county. The articles sampled are listed in Table B.



TABLE A

Localities in which samples were taken during the year

North Kesteven, with approximate population of	40,000	(120)	96
South Kesteven (inc. Bourne U.D.)	"	(66)	90
East Kesteven (inc. Sleaford U.D.)	"	(93)	84
West Kesteven, with approximate population of	18,000	(54)	42
Grantham Borough	"	(78)	77
Stamford Borough	"	(39)	40
	150,000	(450)	429

N.B. The figures in brackets ( ) are the sampling 'targets' for the year based on the Ministry's suggested three samples per 1,000 of population.

TABLE B

List of articles sampled during the year

Butter	14	Preserves	14
Beverages	14	Meat products	18
Cereals	9	Miscellaneous	10
Cheese	5	Sausages	13
Confectionery	9	Soft drinks	17
Cream	16	Table jelly	2
Drugs	11	Tomato ketchup	2
Flavourings, etc.	5	Spirits	6
Fruit, tinned, etc.	17	Vinegar	2
Ice cream	7	Wine	1
Margarine	11		
Milk	222		
Pepper	4	TOTAL	429

The action taken in respect of unsatisfactory samples is set out in Table X on page 71.

WATER SAMPLING

During the year, 42 samples of water were obtained and submitted for bacteriological examination. Six of these proved unsatisfactory. The six samples in question were taken from a private bore. This matter was investigated and it was found that the chlorination plant required attention. Subsequent samples taken from this establishment passed the required test.

In addition, 12 samples of swimming bath water were obtained from school swimming pools and these were found upon examination to be satisfactory. Towards the end of the year a new school swimming pool was completed and opened. Three schools in the county now have their own swimming pool.

RURAL WATER SUPPLIES AND SEWERAGE ACTS

The above enactments which have been in operation for 23 years, have from a public health point of view, been one of the most successful pieces of legislation. They have enabled local authorities to provide those two basic essentials to public health - i.e., a mains water supply together with sewerage and sewage purification schemes. It is pleasing to be able to report that the majority of our villages have these two essentials and every village has a mains water supply. The provision of sewerage schemes is of course expensive but these facilities are the basis of all public health.

During the year under review, the County Council approved the following schemes:-

<u>Authority</u>	<u>Scheme</u>	<u>Estimated Cost</u> £
Sleaford U.D.C.	Mareham Lane Sewerage Scheme	9,130
South Kesteven R.D.C.	(i) Carlby Sewerage Scheme	32,000
	(ii) Rippingale & District Sewerage Scheme	275,000
	(iii) Uffington Sewerage Scheme	68,000
	(iv) Edenham Scottlethorpe and Grimsthorpe Sewerage Scheme	128,000
	(v) West Deeping, Tallington and Barholm Sewerage Scheme	167,000
East Kesteven R.D.C.	Blankney Sewerage Scheme	17,324
West Kesteven R.D.C.	Manthorpe Sewerage Scheme	14,318
South Lincolnshire Water Board	(i) Tallington/Northfields Water Scheme	5,400
	(ii) Dowsby Long Drove Mains Extension	3,723
TOTAL		<u>£719,895</u>

#### NATIONAL SURVEY OF AIR POLLUTION

Full operation of the two stations for measuring atmospheric pollution was maintained throughout the year. These have now been in operation for three years. The County Council are co-operating in Part III of the National Survey of Smoke and Sulphur Dioxide Pollution. This part of the National Survey is designed for rural and open country sites, Part I incorporates the City of London and Greater London and Part II other towns. Every site taking part in the survey is classified according to its location and surroundings and these must be taken into consideration when comparing levels of pollution recorded.

During the year 329 visits were made to the station at Ruskington and 61 at Kirkby Underwood. Recordings made at the two sites shows the levels of pollution to be generally low and continuing much the same as in previous years, with a gradual rise to a peak period during the winter months and falling again to a more consistent level throughout the summer.

I append below details of pollution levels for the year ended March 1966, recorded at the two sites in Kesteven, together with comparative figures for a site situated in a large city amongst high density housing and industry:-

Month	RUSKINGTON		KIRKBY UNDERWOOD		LARGE CITY (COMPARISON)	
	Units - Microgrammes/Cu.M. Smoke S.O.2		Units - Microgrammes/Cu.M. Smoke S.O.2		Units - Microgrammes/Cu.M. Smoke S.O.2	
April	38	32	18	30	160	233
May	22	28	12	26	114	176
June	12	22	8	22	91	163
July	14	23	7	20	107	187
August	19	21	12	21	110	168
September	40	31	24	22	188	244
October	54	28	33	28	266	370
November	70	47	32	34	293	468
December	107	64	49	42	325	432
January	95	55	55	57	246	429
February	44	32	17	28	147	213
March	56	54	26	43	160	226



## NOISE

It is not uncommon for this Department to receive letters of complaint regarding alleged nuisances caused by incessant noise. Some people do not regard noise as a matter for the concern of public health officials. However, noise is a public health nuisance and one which has not received the attention it merits. With the advent of the machine age, it was inevitable that noise should increase. Constant noise like the hum or vibration of machinery, even the incessant barking of dogs, can cause serious nuisance to the public.

Recently the County Health Inspector investigated a complaint regarding the barking and howling of dogs. These dogs were housed in the centre of a large residential village and it was established that the continual noise caused serious nuisance to a number of residents in the village. The owner of the dogs, despite every persuasion would not co-operate in abating this nuisance and it was with reluctance that the County Council instituted legal proceedings. The owner was fined.

TABLE I - VITAL STATISTICS 1966

Districts	Popul'n Mid-year 1966 (R.G.Est.)	No. of Live Birth			Crude Birth Rate	Nett Birth Rate	No. of Still- Births			Deaths under 1 year of age			Inf. Mort. Rate	No. of Deaths			Crude Death Rate	Nett Death Rate
		M	F	Total			M	F	Total	M	F	Total		M	F	Total		
Eourne	5,640	41	39	80	14.18	14.18	-	1	1	-	1	1	12.50	41	26	67	11.88	12.71
Grantham	26,030	250	251	501	19.25	20.59	3	1	4	5	2	7	13.97	188	145	333	13.18	13.04
Sleaford	7,940	58	70	128	16.12	17.25	-	1	1	-	-	-	0.00	74	88	162	20.40	12.04
Stamford	12,910	115	103	218	16.81	17.65	-	-	-	3	2	5	22.93	98	88	186	14.41	11.24
Total Urban Districts	52,520	464	463	927	17.65	18.71	3	3	6	8	5	13	14.02	401	347	748	14.24	12.10
East Kesteven	22,940	220	218	438	19.09	19.86	4	5	9	4	4	8	18.26	94	99	193	8.41	9.51
North Kesteven	40,070	391	390	781	19.49	18.71	2	6	8	7	10	17	21.77	224	223	447	11.15	9.26
South Kesteven	15,860	159	161	320	20.18	20.78	3	1	4	4	2	6	18.75	94	75	169	10.65	11.08
West Kesteven	18,190	158	153	311	17.10	15.73	1	1	2	4	4	8	25.72	122	84	206	11.32	12.57
Total Rural Districts	97,060	928	922	1,850	19.06	18.68	10	13	23	19	20	39	21.08	534	481	1,015	10.46	10.14
Total Administrative County	149,580	1,392	1,385	2,777	18.56	18.56	13	16	29	27	25	52	18.72	935	828	1,763	11.79	10.84



TABLE II - SHOWING FOR EACH COUNTY DISTRICT THE NUMBER AND CAUSES OF DEATH DURING 1966

CAUSES OF DEATH	Bourne U.D.	Grantham Borough	Sleaford U.D.	Stamford Borough	Aggregate	E. Kesteven R.D.	N. Kesteven R.D.	S. Kesteven R.D.	W. Kesteven R.D.	Aggregate	TOTALS
1. Tuberculosis, respiratory	-	-	1	-	1	1	2	-	-	3	4
2. Tuberculosis, other	-	-	-	-	-	-	-	-	-	-	-
3. Syphilitic disease	-	-	1	-	1	-	-	-	-	-	1
4. Diphtheria	-	-	-	-	-	-	-	-	-	-	-
5. Whooping Cough	-	-	-	-	-	-	-	-	-	-	-
6. Meningococcal infections	-	-	-	-	-	-	-	-	-	-	-
7. Acute Poliomyelitis	-	-	-	-	-	-	-	-	-	-	-
8. Measles	1	-	-	-	1	-	-	-	-	-	1
9. Other infective and parasitic diseases	-	1	-	-	1	-	1	-	-	1	2
10. Malignant neoplasm, stomach	2	3	4	4	13	7	8	9	6	30	43
11. Malignant neoplasm, lung, bronchus	3	15	5	4	27	2	10	6	9	27	54
12. Malignant neoplasm, breast	2	6	2	3	13	1	5	2	7	15	28
13. Malignant neoplasm, uterus	1	4	1	3	9	-	4	2	2	8	17
14. Other malignant and lymphatic neoplasms	6	34	8	23	71	18	32	16	21	87	158
15. Leukaemia, aleukameia	-	-	1	-	1	1	2	2	1	6	7
16. Diabetes	1	4	2	-	7	1	6	3	1	11	18
17. Vascular lesions of nervous system	8	43	17	19	87	33	53	14	23	123	210
18. Coronary disease, angina	10	50	29	38	127	45	77	25	36	183	310
19. Hypertension with heart disease	-	3	5	3	11	2	11	2	3	18	29
20. Other heart disease	16	56	34	22	128	16	61	38	29	144	272
21. Other circulatory disease	5	31	14	7	57	13	19	4	8	44	101
22. Influenza	-	5	2	2	9	2	5	-	6	13	22
23. Pneumonia	5	15	15	11	46	10	48	8	8	74	120
24. Bronchitis	2	15	2	6	25	5	24	5	15	49	74
25. Other diseases of respiratory system	-	3	2	5	10	2	2	-	-	4	14
26. Ulcer of stomach and duodenum	1	2	-	-	3	1	1	-	-	2	5
27. Gastritis, enteritis and diarrhoea	-	-	2	3	5	4	-	-	2	6	11
28. Nephritis and nephrosis	-	2	1	1	4	-	-	3	1	4	8
29. Hyperplasia of prostate	-	2	1	-	3	-	2	1	-	3	6
30. Pregnancy, childbirth, abortion	-	-	-	-	-	-	-	1	-	1	1
31. Congenital malformations	-	1	1	-	2	2	9	3	1	15	17
32. Other defined and ill-defined diseases	2	29	11	20	62	12	47	19	19	97	159
33. Motor vehicle accidents	1	7	-	3	11	6	6	4	5	21	32
34. All other accidents	1	2	1	7	11	8	9	1	3	21	32
35. Suicide	-	-	-	2	2	1	3	1	-	5	7
36. Homicide and operations of war	-	-	-	-	-	-	-	-	-	-	-
ALL CAUSES	67	333	162	186	748	193	447	169	206	1,015	1,763





TABLE III - CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE DURING 1966

CAUSES OF DEATH	Sex	AGGREGATE OF URBAN DISTRICTS											AGGREGATE OF RURAL DISTRICTS											
		All Ages	Under 4 wks	4 wks. & under 1 year	1-5	5-15	15-25	25-35	35-45	45-55	55-65	65-75	All Ages	Under 4 wks	4 wks. & under 1 year	1-5	5-15	15-25	25-35	35-45	45-55	55-65	65-75	
All Causes	M F	401 347	6 4	2 1	3 1	7 1	2 1	10 1	26 17	61 31	122 88	162 201	534 481	14 15	5 5	2 1	2 -	16 2	5 5	18 10	30 24	90 54	151 113	201 252
1. Tuberculosis, respiratory	M	1	-	-	-	-	-	-	-	-	1	-	1	-	-	-	-	-	-	-	-	-	1	-
2. Tuberculosis other	F	-	-	-	-	-	-	-	-	-	-	-	2	-	-	-	-	-	-	-	-	-	-	2
3. Syphilitic disease	M	1	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
4. Diphtheria	F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
5. Whooping Cough	M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
6. Meningococcal Infection	F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
7. Acute Poliomyelitis	M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
8. Measles	F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
9. Other infective & parasitic diseases	M	1	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-	-	-	-	-	-	-
10. Malignant neoplasm, stomach	F	8	-	-	-	-	-	-	-	1	4	2	15	-	-	-	-	-	2	-	-	2	4	7
11. Malignant neoplasm lung, bronchus	M	5	-	-	-	-	-	-	2	8	9	3	24	-	-	-	-	-	-	-	8	7	13	1
12. Malignant neoplasm breast	F	1	-	-	-	-	-	-	-	-	1	-	3	-	-	-	-	-	1	-	-	1	1	1
13. Malignant neoplasm, uterus	F	12	-	-	-	-	-	-	1	1	4	6	15	-	-	-	-	-	2	4	6	1	2	2
14. Other malignant & lymphatic neoplasms	M	9	-	-	-	-	-	-	1	1	2	5	8	-	-	-	-	-	-	-	3	3	2	2
15. Leukaemia, Aleukaemia	M	41	-	-	-	2	-	2	2	11	12	12	50	-	-	-	-	-	5	3	11	14	17	
16. Diabetes	F	30	-	-	-	1	-	5	5	-	9	9	37	-	-	-	-	2	-	-	9	10	13	2
17. Vascular lesions of nervous system	M	1	-	-	-	-	-	-	-	-	1	-	5	-	-	-	-	2	-	-	1	-	-	1
18. Coronary disease Angina	F	3	-	-	-	-	-	-	-	-	-	-	8	-	-	-	-	-	-	-	-	-	-	3
19. Hypertension with heart disease	M	4	-	-	-	-	-	-	-	-	-	4	3	-	-	-	-	-	-	-	-	-	-	25
20. Other heart disease	F	7	-	-	-	-	-	-	1	3	15	5	11	-	-	-	-	-	1	1	7	21	25	
21. Other circulatory disease.	M	64	-	-	-	-	-	-	-	1	8	18	56	-	-	-	-	-	-	-	5	11	51	
22. Influenza	F	33	-	-	-	-	-	-	1	6	7	36	67	-	-	-	-	-	-	-	9	10	13	
23. Pneumonia	M	24	-	-	-	-	-	3	9	13	26	22	116	-	-	-	-	-	1	6	28	40	40	
24. Bronchitis	F	5	-	-	-	-	-	-	-	4	27	23	67	-	-	-	-	-	2	5	5	27	28	
25. Other disease of respiratory system	M	4	-	-	-	-	-	-	1	-	2	1	7	-	-	-	-	-	-	-	-	4	3	
26. Ulcer of stomach & duodenum	F	7	-	-	-	-	-	-	1	-	1	5	11	-	-	-	-	-	-	1	2	4	4	
27. Gastritis, enteritis & diarrhoea	M	64	-	-	-	-	-	-	-	3	15	44	70	-	-	-	-	-	2	3	6	14	45	
28. Nephritis and Nephrosis	F	64	-	-	-	-	-	-	-	1	8	55	74	-	-	-	-	-	-	2	1	16	53	
29. Hyperplasia of prostate	M	33	-	-	-	-	-	-	1	1	12	19	21	-	-	-	-	-	-	2	1	7	12	
30. Pregnancy, child-birth, abortion	F	24	-	-	-	-	-	-	2	-	5	17	23	-	-	-	-	-	2	-	3	4	4	
31. Congenital malformations	M	5	-	-	-	-	-	-	-	-	3	2	9	-	-	-	-	-	-	-	-	-	-	6
32. Other defined and ill-defined diseases	F	8	-	-	-	-	-	-	-	-	7	15	29	-	-	-	-	-	-	-	1	4	12	
33. Motor Vehicle Accidents	M	2	-	-	-	-	-	-	1	2	8	6	36	-	-	-	-	-	1	2	3	8	29	
34. All other accidents	F	4	-	-	-	-	-	-	-	5	3	2	13	-	-	-	-	-	-	-	5	15	15	
35. Suicide	M	-	-	-	-	-	-	-	-	-	5	2	1	-	-	-	-	-	-	-	-	-	-	8
36. Homicide & Operations of war	F	3	-	-	-	-	-	-	-	-	2	1	3	-	-	-	-	-	-	-	-	-	-	1





TABLE IV - INFANT WELFARE CENTRES, 1966

Address of Centre	Days of Opening	First Attendances During Current Year of children				Attendances of Children				Consultations with Medical Officer	
		Born in 1966	Born in 1965	Born in 1961 to 1964	Total	Born in 1966	Born in 1965	Born in 1961 to 1964	Total with Average	Seen by M.O.	Refd. to Spec.
ALLINGTON Village Hall	3rd Thursday	15	9	16	40	69	82	157	308 (25.5)	28	3
ANCASTER Village Hall	4th Thursday	27	19	8	54	84	93	60	237 (19.5)	70	NIL
BARROWBY Reading Room	3rd Tuesday	12	14	11	37	37	75	39	151 (12.5)	37	1
BASSINGHAM Comrades Hall	3rd Tuesday	13	14	20	47	46	132	154	332 (28)	133	NIL
BILLINGBOROUGH Toller Hall	3rd Tuesday	24	27	57	108	124	161	228	513 (43)	162	1
BILLINGHAY Church Hall	2nd & 4th Wednesday	26	15	4	45	210	116	87	413 (18)	31	NIL
BOURNE Clinic North Road	1st & 3rd Thursday	89	97	119	305	1,007	986	564	2,557 (52)	210	5
BRACEBRIDGE HEATH Village Hall	2nd & 4th Thursday	63	63	54	180	522	672	502	1,696 (70)	208	1
BRANSTON Methodist Chapel	2nd Tuesday	31	22	27	80	102	152	86	340 (28)	82	3
CANWICK Village Hall	3rd Tuesday	3	3	14	20	16	32	76	124 (10)	35	2
CASTLE BYTHAM Village Hall	2nd Wednesday	14	7	11	32	76	34	88	198 (16.5)	87	1
CAYTHORPE Village Hall	2nd Wednesday	31	12	9	52	133	77	88	298 (25)	100	NIL
CLAYPOLE Village Hall	1st Thursday	11	12	13	36	55	88	44	187 (15.5)	18	1
COLSTERWORTH Wesleyan School	4th Monday	19	11	18	48	87	96	121	304 (25)	31	NIL
CORBY The Church Room	2nd Thursday	8	10	14	32	25	83	105	213 (18)	49	2

TABLE IV - INFANT WELFARE CENTRES, 1966 (Contd)

Address of Centre	Days of Opening	First Attendances During Current Year of children				Attendances of Children				Consultations with Medical Officer	
		Born in 1966	Born in 1965	Born in 1961 to 1964	Total	Born in 1966	Born in 1965	Born in 1961 to 1964	Total with Average	Seen by M.O.	Refd. to Spec.
CRANWELL R.A.F. Station	1st & 3rd Thursday	94	40	14	148	396	246	102	744 (31)	NIL	NIL
DEEPING ST. JAMES Church Hall	2nd & 4th Wednesday	48	40	57	145	295	361	177	833 (35)	259	2
DRY DODDINGTON Village Hall	3rd Tuesday	9	5	9	23	30	37	89	156 (13)	NIL	NIL
EAGLE Village Hall	2nd Wednesday	19	13	13	45	67	109	92	268 (22)	106	NIL
FOLKINGHAM Village Hall	4th Friday	2	12	6	20	14	56	34	104 (9.5)	67	NIL
GRANTHAM 40, Westgate	Tuesday a.m. & p.m. Wed. p.m. Thurs. a.m. & p.m.	292	196	207	695	2,907	2,018	773	5,698 (36.5)	1,239	20
GRANTHAM Harrowby Lane Methodist Church Hall	Every Wednesday	84	59	48	191	1,209	767	577	2,553 (50.5)	140	1
GRANTHAM Beaconfield Clinic	Every Thursday	135	69	24	228	1,554	1,020	657	3,231 (62)	408	9
GREAT GONERBY Memorial Hall	1st Wednesday	28	19	19	66	112	92	109	313 (26)	42	2
HARLAXTON Village Hall	3rd Thursday	2	7	8	17	12	44	36	92 (8)	15	1
HECKINGTON Village Hall	3rd Thursday	17	9	24	50	63	106	145	314 (28.5)	77	NIL
HEIGHINGTON Methodist Schoolroom	2nd Thursday	15	9	10	34	109	139	106	354 (29.5)	90	1
HELPRINGHAM Memorial Hall	1st Friday	12	22	29	63	47	166	127	340 (28)	10	11
HOUGH-ON-THE-HILL The Brownlow Arms	3rd Wednesday	2	10	9	21	9	68	95	172 (14)	20	NIL
INGOLDSBY Village Hall	1st Wednesday	7	6	17	30	23	33	101	157 (13)	32	2
LANGTOFT R.A.F. Wives Club	3rd Monday	24	25	49	98	116	107	167	390 (32.5)	177	1



TABLE IV - INFANT WELFARE CENTRES, 1966 (Contd)

Address of Centre	Days of Opening	First Attendances During Current Year of children				Attendances of Children			Consultations with Medical Officer	
		Born in 1966	Born in 1965	Born in 1961 to 1964	Total	Born in 1966	Born in 1965	Born in 1961 to 1964	Seen by M.O.	Refd. to Spec.
LEADENHAM Village Hall	4th Tuesday	18	17	12	47	67	150	106	65	1
LEASINGHAM Village Hall	1st Tuesday	10	13	10	33	45	41	79	93	NIL
LINCOLN BRANT ROAD Social Club	4th Monday	50	31	19	100	247	258	145	237	2
LONG BENNINGTON Village Hall	Alternating 2nd Thurs. & 2nd Mon.	7	11	21	39	52	88	178	34	5
MARKET DEEPING Town Hall	2nd & 4th Monday	44	48	84	176	406	287	211	306	3
MARTIN Village Hall	3rd Wednesday	18	5	10	33	42	58	63	136	NIL
METHERINCHAM Village Hall	1st & 3rd Wednesday	26	17	20	63	232	186	228	236	NIL
MORTON Baptist Church Hall	3rd Friday	20	12	2	34	41	59	37	NIL	NIL
NAVENBY Wesleyan School	2nd Friday	20	32	14	66	98	166	111	130	1
NOCTON Village Hall	4th Wednesday	21	6	7	34	102	68	121	109	3
NORTH HYKEHAM Church Hall	2nd & 4th Tuesday	75	61	34	170	499	579	141	266	6
NORTH HYKEHAM (Newark Road) Memorial Hall	1st & 3rd Monday	35	31	25	91	322	271	126	84	NIL
NORTH HYKEHAM St. Hugh's Church Hall	1st & 3rd Wednesday	80	111	47	238	666	804	159	308	1
NORTON DISNEY Village Hall	2nd Friday	1	10	12	23	8	61	73	25	1
OSBOURNBY Village Hall	Last Thursday	11	8	19	38	49	50	120	219	NIL

TABLE IV - INFANT WELFARE CENTRES, 1966 (Contd.)

Address of Centre	Days of Opening	First Attendances During Current Year of Children				Attendances of Children				Consultations with Medical Officer	
		Born in 1966	Born in 1965	Born in 1961 to 1964	Total	Born in 1966	Born in 1965	Born in 1961 to 1964	Total with Average	Seen by M.O.	Refd. to Spec.
POTTERHANWORTH Village Hall	3rd Friday	6	4	8	18	28	51	101	180 (15)	73	NIL
ROPSLEY Village Hall	3rd Friday	13	4	5	22	71	16	12	99 (8)	29	NIL
RUSKINGTON Wesleyan School Room	2nd & 4th Thursday	79	22	19	130	496	286	208	990 (41)	295	2
SKELLINGTHORPE Women's Institute	2nd Monday	28	27	25	80	112	209	197	518 (43)	161	1
SHEAFORD Riversdale House Westgate	Every Monday	133	79	66	278	1,149	625	255	2,029 (42)	370	21
SOUTH KYME Village Hall	4th Tuesday	5	5	5	15	44	60	61	165 (15)	106	NIL
SOUTH WITHAM Church Hall	3rd Wednesday	14	16	21	51	59	108	135	302 (27.5)	81	1
STAMFORD Barnhill Clinic	Every Friday	237	195	261	693	2,303	2,211	1,195	5,709 (114)	1,271	8
STOKE ROCHFORD Village Hall	Last Wednesday	6	4	9	19	13	31	61	105 (9)	18	1
SWINDERBY Methodist Schoolroom	1st Friday	13	5	10	28	63	45	86	194 (16)	113	2
THURLBY Chapel Hall	2nd Friday	7	3	7	17	33	29	29	91 (8)	NIL	NIL
WADDINGTON Church Hall	1st & 3rd Tuesday	39	21	17	77	362	259	292	913 (38)	108	1
WADDINGTON R.A.F.	1st & 3rd Thursday	58	42	35	135	334	363	264	961 (40)	NIL	NIL
WASHINGTON Village Hall	3rd Tuesday	16	13	10	39	93	97	129	319 (26.6)	67	2



TABLE V - DENTAL SERVICES FOR EXPECTANT AND NURSING MOTHERS AND CHILDREN UNDER 5 YEARS

Part A. Attendances and Treatment

Number of visits for treatment during year

First visit

Subsequent visits

Total visits

Number of additional courses of treatment other than the first course commenced during year

Treatment provided during the year -

Number of fillings

Teeth filled

Teeth extracted

General Anaesthetics given

Emergency visits by patients

Patients x-rayed

Patients treated by scaling and/or removal of stains from the teeth (Prophylaxis)

Teeth otherwise conserved

Teeth root filled

Inlays

Crowns

Number of courses of treatment completed during the year

Children 0-4 (incl.)	Expectant and Nursing Mothers
1. 186	13. 52
2. 128	14. 51
314	103
3. 20	15. 1
4. 128	16. 121
5. 111	17. 104
6. 230	18. 9
7. 86	19. NIL
8. 61	20. 1
9. NIL	21. 7
10. 17	22. 12
11. 65	
	23. NIL
	24. NIL
	25. 1
12. 157	26. 23

Part B. Prosthetics

Patients supplied with F.U. or F.L. (first time)

Patients supplied with other dentures

Number of dentures supplied

27.	NIL
28.	NIL
29.	NIL

Part C. Anaesthetics

General Anaesthetics administered by Dental Officers

30.	NIL
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Part D. Inspections

Number of patients given first inspections during year

Number of patients in A and D above who required treatment

Number of patients in B and E above who were offered treatment

Children 0-4 (incl.)	Expectant and Nursing Mothers
A. 244	D. 59
B. 191	E. 55
C. 190	F. 55

TABLE VI \* PREMATURE INFANTS BORN DURING 1966

	PREMATURE LIVE BIRTHS												PREMATURE STILLBIRTHS		
	Born in Hospital				Born at Home or in a Nursing Home										
					Nursed entirely at home or in a Nursing Home				Transferred to Hospital on or before 28th day						
Total Births	Died			Total Births	Died			Total Births	Died			Born			
	Within 24 hours of birth	In 1 and under 7 days	In 7 and under 28 days		Within 24 hours of birth	In 1 and under 7 days	In 7 and under 28 days		Within 24 hours of birth	In 1 and under 7 days	In 7 and under 28 days				
2 lb 3 oz or less	4	3	-	-	-	-	-	-	1	-	-	-	2	-	At home or in a Nursing Home
Over 2 lb 3 oz up to and including 3 lb 4 oz	11	4	4	-	2	1	-	-	-	-	-	-	1	-	-
Over 3 lb 4 oz up to and including 4 lb 6 oz	27	4	2	1	2	-	-	-	-	-	-	-	4	1	-
Over 4 lb 6 oz up to and including 4 lb 15 oz	33	-	-	-	1	-	-	-	-	-	-	-	3	-	-
Over 4 lb 15 oz up to and including 5 lb 8 oz	62	1	-	-	11	-	-	-	1	-	-	-	5	-	-
TOTAL	137	12	6	1	16	1	-	-	2	-	-	-	15	1	-

\* i.e. babies weighing 5½ lbs. or less at birth, irrespective of period of gestation.



TABLE VII - DOMESTIC HELP SERVICE

Area	Year	CASES ASSISTED - ANALYSIS BY TYPE OF CASE							Number of Helps employed at end of year (all part- time)	Total Hours Worked by Helps
		Maternity	T.B.	Chronic Sick (under 65 years)	Chronic Sick (over 65 years)	Problem Families	Others (Short-term Sickness etc.)	Total		
GRANTHAM AND WEST KESTEVEN	1965	6 (6)	2 (-)	43 (19)	263 (90)	4 (3)	10 (7)	328 (125)	64	46,483
	1966	15 (15)	2 (1)	34 (15)	285 (89)	4 (3)	14 (11)	354 (134)	79	52,841
SLEAFORD, NORTH & EAST KESTEVEN	1965	20 (19)	- (-)	54 (21)	278 (121)	1 (-)	39 (30)	392 (191)	56	45,096
	1966	32 (32)	- (-)	65 (23)	284 (104)	1 (1)	40 (31)	422 (191)	63	45,456
STAMFORD, SOUTH KESTEVEN AND BOURNE	1965	21 (21)	- (-)	24 (10)	174 (49)	5 (2)	18 (10)	242 (92)	41	40,251
	1966	12 (11)	- (-)	21 (3)	171 (47)	3 (2)	12 (8)	219 (71)	41	34,444
TOTALS	1965	47 (46)	2 (-)	121 (50)	715 (260)	10 (5)	67 (47)	962 (408)	161	131,830
	1966	59 (58)	2 (1)	120 (41)	740 (240)	8 (6)	66 (50)	995 (396)	183	132,741

The figures in brackets denote new cases helped, i.e. cases who had not received help before the year in which they are shown.

TABLE VIII - DISTRIBUTION OF NOTIFIED CASES OF INFECTIOUS AND OTHER NOTIFIABLE DISEASES IN RURAL AND URBAN DISTRICTS 1966

(Including Non-Civilians)

Sanitary District	Total No. Notified	Scarlet Fever	Diphtheria	Measles	Whooping Cough	Acute Pneumonia	Ophthalmia Neonatorum	Puerperal Pyrexia	Dysentery	Erysipelas	Acute Polio-myelitis		Para-Typhoid Fever	Acute Enceph-alitis		Meningococcal Infection	Food Poisoning	Malaria	Enteric Fever	Anthrax
Bourne U.D.	193 (37)	33	-	139	9	9	-	1	2	-	-	Paralytic	-	-	Post Infectious	-	-	-	-	-
Grantham M.B.	495 (121)	4	-	410	19	-	-	2	60	-	-	Paralytic	-	-	-	-	-	-	-	-
Sleaford U.D	14 (133)	-	-	9	-	1	-	-	3	-	-	Paralytic	-	-	-	-	1	-	-	-
Stamford M.B.	45 (142)	10	-	27	6	-	-	2	-	-	-	Paralytic	-	-	-	-	-	-	-	-
Aggregate of Urban Districts	747 (433)	47	-	585	34	10	-	5	65	-	-	-	-	-	-	-	1	-	-	-
E. Kesteven R.D.	112 (457)	4	-	70	1	31	-	-	4	1	-	-	-	-	-	-	1	-	-	-
N. Kesteven R.D.	317 (571)	3	-	293	-	-	-	1	18	1	-	-	-	-	-	1	-	-	-	-
S. Kesteven R.D.	164 (82)	31	-	116	7	8	-	1	1	-	-	-	-	-	-	-	-	-	-	-
W. Kesteven R.D.	230 (67)	44	-	172	-	-	-	-	14	-	-	-	-	-	-	-	-	-	-	-
Aggregate of Rural Districts	823 (1,177)	82	-	651	8	39	-	2	37	2	-	-	-	-	-	1	1	-	-	-
Totals for whole County	1,570 (1,610)	129	-	1,236	42	49	-	7	102	2	-	-	-	-	-	1	2	-	-	-

Note: Figures in brackets relate to 1965.



TABLE IX - SCHOOL CLINICS

Address	Minor Ailments 1	Dental 2	Orthopaedic 3	Ophthalmic *	E.N.T. *	Speech Therapy 6	Child Guidance 7
Beaconfield Grantham	Mon - Fri. inc. 9 - 12 noon M.O. in attendance Tuesday only	Mon - Fri. 9 a.m. - 5 p.m.	Mon. 2 - 5 p.m. Wed. 9 a.m. - 5 p.m. Fri. 9 a.m. - 5 p.m.	Mon. 10 a.m. - 1 p.m.	First Thurs. each month 9.30 - 12 noon	Wed. 9 a.m. - 4 p.m. Fri. 1 - 4 p.m.	Mon. & 1st & 3rd Wed. each month 9.30 a.m. - 12.30 p.m. 2 p.m. - 5 p.m.
Barnhill House, Stamford	Mon. Weds. and Friday 9 - 11 a.m. M.O. in attendance Friday only	As required	Tues. 9.30 - 12 noon	1st & 3rd Thurs. each month 9 - 11 a.m.	-	Mon. 9 a.m. - 4 p.m.	-
North Street, Bourne	Tues. & Thurs. 9-12 noon. M.O. in attendance Thursday only	As required	Tuesday 2 - 4.30 p.m.	4th Thursday each month 2 - 4 p.m.	-	Thurs. 1 - 4 p.m.	Bourne House Hostel Fri. 2 p.m. - 5 p.m.
Riversdale House, Sleaford	Mon. Weds. & Fri. 9 - 11 a.m. M.O. in attendance Mondays only	Mon. - Fri. 9 a.m. - 5 p.m.	Mon. 9.30 a.m. - 12.30 p.m. Thursday 9.30 a.m. - 4.30 p.m.	1st, 2nd & 3rd Thurs. each month. 10 a.m. - 12.30 p.m.	1st Tues. each month 2 p.m.	Mon. & Fri. 9 a.m. - 4 p.m. Thurs. 9 a.m. - 12 noon	Fri. 9.30 a.m. - 12.30 p.m.
30 Lindum Road, Lincoln	Wednesday 9.30 - 11.30 a.m. M.O. in attendance each session	-	-	-	-	Wed. 1 - 4 p.m.	-
Surgeon attends as required			* under arrangements with the Regional Hospital Boards.				

Services under columns 2 - 7 by appointment only

TABLE X - ACTION TAKEN UNDER THE FOOD AND DRUGS ACT, 1955, IN RESPECT OF UNSATISFACTORY SAMPLES - 1966

<u>Sample No.</u>	<u>Article</u>	<u>Report of Public Analyst</u>	<u>Action taken</u>
A. 8	Child's plastic tool set	<p>Grey hammer - Lead 200 parts per million</p> <p>Red Screwdriver - 1700</p> <p>Black pliers - 250</p> <p>Orange axe - 50</p> <p>Orange hammer - 60</p> <p>The Home Office recommends that no toy likely to be sucked by a child should contain more than 250 ppm of lead.</p>	<p>This child's tool set was sent for examination at the request of the Medical Officer of Health for Bourne Urban District following a complaint.</p> <p>Answering a question in the House of Commons recently, the Home Secretary had said he was aware of these hazards and ...</p> <p>"So far as children's toys were concerned, a restriction on the lead content of the paint used would be included in Regulations dealing with other safety aspects of toys which were now being prepared under the Consumer Protection Act."</p> <p>In the circumstances, the file in this case was sent to the County Medical Officer.</p>
A. 7	Child's toy pistol	The silver finish contained less than 50 ppm of lead.	This was a similar case; where a general practitioner thought a child's toy pistol might have been the cause of symptoms akin to those of lead poisoning. The Medical Officer of Health for Stamford was informed of the analyst's findings.
B. 10	Almond Flavour	Satisfactory	This was a food flavour which was said to be unsatisfactory in that it smelt strongly of ether and was inflammable. The analyst found it contained iso propyl alcohol (an inflammable substance) but this was normal. The smell of ether he could not substantiate. The complainant (a former nurse) was informed of the analyst's findings.
B. 12	Shortbread	Contained 29.3% fat all of which was butterfat.	This was an excellent sample of home-made shortbread, but packed in a plain wrapper contrary to the Labelling of Food Order. The maker's attention was drawn to the labelling omissions.
B. 141	Orange drink	Contained a permitted artificial sweetener (saccharin) which was not declared on the label.	This was a home-made product and the vendor was using some old plain cartons. He was advised of his responsibilities under the relevant Food Orders.



TABLE X - ACTION TAKEN UNDER THE FOOD AND DRUGS ACT, 1955, IN RESPECT OF UNSATISFACTORY SAMPLES - 1966 (Contd)

<u>Sample No.</u>	<u>Article</u>	<u>Report of Public Analyst</u>	<u>Action taken</u>
B.142	Prunes	Contained sorbic acid as a preservative contrary to the Preservatives in Food Regulations.	Under the Preservatives in Food Regulations, prunes may contain sulphur dioxide, but not sorbic acid. These prunes were packed in the U.S.A., where sorbic acid is a permitted preservative. In the circumstances, the attention of the importers was drawn to this difference in the two countries' food laws.
B.163	Tomato ketchup	Product satisfactory and complying with the Food Standards (Tomato Ketchup) Order, but bottle unlabelled.	This was a home-made product and the maker was using plain glass jars. The vendor was advised that the Labelling of Food Order applied to all foodstuffs offered for sale to the public.
B.168	Dried Skimmed-milk (with added non-milk fat) and vitamins.	Product entirely satisfactory.	This case arose when a mother who had lost her first baby complained that she had found a 'grub' or maggot in the food she was preparing for her baby's evening feed, having opened the tin at mid-day. It was of great importance in view of the international reputation of the makers and that is why the public analyst sought the opinion of the Ministry's regional entomologist to confirm his view that the 'grub' entered the tin after it had been opened. The mother was discreetly advised.
CC. 4	Date and Walnut cake.	Not sent - cake with sliver of wood.	This cake (which contained a sliver of wood) was bought for a children's tea party. It was made by a Peterborough firm who, in view of their good record, were cautioned in writing.
CC. 5	Veal and ham pie.	Not sent - pie contained piece of metal.	Legal proceedings were instituted and the firm concerned was fined £10.







